**REGISTRATION FORM – PLEASE WRITE LEDGIBLY!**

March 24, 2013, at 12pm

“5k Run SCOUTStrong” Road-Race at DCR Nantasket Beach Reservation

Date:\_\_\_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_ Age on March 24, 2013:\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (required!)

Emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about this race?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**T-SHIRT Size: \_\_\_\_\_Small \_\_\_\_\_Medium \_\_\_\_Large \_\_\_\_\_XL**

Registrations post-dated/or received on-line before March 22, 2013**: $25.00** (18 and over), **$15.00** (under 18**), $13.00** (Active Scout)

All registrations post-dated/or received on-line on or after March 22, 2013: **$28.00**

Check your age group: All walkers welcome – proceed behind runners at start line. No pets. Strollers, headphones discouraged.

5K Run/Walk: (18 years & over) runner \_\_\_\_ walker \_\_\_\_\_

5K Run/Walk (under 18) runner \_\_\_\_ walker\_\_\_\_\_

(Need parent or guardian’s signature on waiver, and if 13 or under, need a parent or guardian’s presence at race)

5K Run/Walk (Active Scouts) runner \_\_\_\_\_ walker \_\_\_\_ Troop number: \_\_\_\_\_ Scout leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please make checks payable to: ”Friends of Hull Scouting, Inc.” Mail payment by check with form to: Race Director, 5kSCOUTStrong,

Caroiine M. Wagner, 20 Berkely Road, Hull, MA 02045

**Waiver**

I know that running a road race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, rain, snow, cold temperatures, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards roller skates or roller blades, animals, and strollers are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Race Director, Caroline M. Wagner, and Race Committee of 5K Run SCOUT Strong at DCR Nantasket Reservation, the Town of Hull, The DCR, Commonwealth of Massachusetts and The Friends of Hull Scouting and Boy Scouts of America, as well as all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature if under 18 years:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_