



Rochester Optimist Frozen Goose Registration and Waiver

Date / Time: February 4, 2012
 Registration Noon
 Race Starts at 1:00pm

Fee: Minimum Pledge: \$25 Individual, \$40 Family

Place: University Center Rochester Atrium
 851 30th Avenue SE

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Email Address _____

Amount Donated (See next page for information on incentive prizes)

I will participate in: 5K Run/Walk 10K Run

Sex M/F _____ **Age-** _____ **Birthday** _____ (Men's and Women's age-bracket winners for 10K)

Completed forms and entry fees may be mailed at least 5 days prior to the event to:
Rochester Optimist Club
PO Box 485
Rochester MN 55906-0485

WAIVER & RELEASE OF LIABILITY

I understand that participation in this event involves risks of serious injury, including permanent disability, death, and other losses, both to me and my property. I understand that these injuries and losses might result not only from my actions, but the actions, inactions or negligence of others.

I agree that I am responsible for my safety while participating in the event and that I am both physically and psychologically prepared to participate safely. I assume all risks connected with any injury or loss connected with my participation in the event. I also grant full permission to use my name and any photographs, videotapes, or other record of this event for any purpose.

Aware of the risks and willing to assume them, I hereby waive, release, and hold harmless The Optimist Club of Rochester Minnesota, Optimist International, and each of those organizations' officers, directors, officials, volunteers, event organizers or sponsors from all claims by me for any liability, injury, loss or damage in any way connected with my participation in the Activity, except where caused by the gross negligence or willful or wonton misconduct of any of the related parties. I intend for this waiver and release to also apply to any relatives, personal representative, heirs, beneficiaries, next of kin, or assigns who might pursue any legal action or claim on my behalf.

Print and Sign Name: _____ Date: ____/____/____

FOR ATHLETES OF MINORITY AGE

If athlete is less than 18 years of age, then the parent or legal guardian must sign below (**may combine minors names on same sheet**) This is to certify that, as parent/guardian of this participant, I do consent to his/her agreement to be bound by each of the terms and conditions identified above.

Parent/Guardian Print and Sign Name: _____ Date: ____/____/____

