



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

DATE:	August 18th, 2018
TIME:	8:00 a.m.
ENTRY FEE:	\$20 thru August 10th \$27 August 11th-18th

5K Run/Walk Registration Form

Sponsored by: Adkins Family Dentistry

Name (First & Last) _____ DOB (mm/dd/yyyy) _____ Gender (circle one) M F

Age on Race Day _____ Home/Cell Phone _____ Email _____

Address _____
Street City State Zip

Emergency Contact (First & Last) _____ Phone _____

Shirt Size (circle one): YL S M L XL 2XL

YMCA of Greene County Member (circle one): Yes No

WAIVER: I know that participating in a road race is 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, am in good health and 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, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or roller blades, animals, and personal music players 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 Greene County YMCA 5K Run/Walk, the city of Greeneville, the State of Franklin Track Club, 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. I understand that this event does not provide refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

Signature _____ Date _____

Parent Signature (if under 18 years) _____ Date _____

This is a State of Franklin King and Queen Road Series Race. SFTC Members are eligible for a \$1.00 discount (ends 8/10/18). Race Day registration will be available from 6:30 a.m.—7:45 a.m. **Refunds not available.** Return or mail registration form and fees to the YMCA (c/o: Tasha Ferrell) at 404 Y Street, Greeneville, TN 37745. Checks payable to YMCA of Greene County.

MALE & FEMALE AWARDS: Top Overall, Top Masters, Top GrandMasters, Top Sen. GrandMasters, Top 3 Age Group Finishers

AGE GROUPS: 11 & under, 12-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 74-79 and 80+

MORE INFORMATION? Please contact Tasha Ferrell at tashaf@greene-county-ymca.org or 423-639-6107 (ask for Tasha) or Bob Townsend at bobtownsend@comcast.net or 423-525-7335

Course Map

