

# The Sugar Land Christmas Run 5k

5K Run and Kids Fun Run  
December 12, 2009

Cash /Check: \$ \_\_\_\_\_

Bib Number: # \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone:(\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ @ \_\_\_\_\_ T-shirt size (circle one): S M L XL XXL

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Gender: M F Emergency Contact: \_\_\_\_\_

Age Group (circle one): 10-14, 15-18, 19-29, 30-39, 40-49, 50-59, 60-69, 70+ Phone:(\_\_\_\_\_) \_\_\_\_\_

I learned of this event from : \_\_\_\_\_

18 and over Pre Registration \$20.00 Before December 4<sup>th</sup>, 2009 (\$25.00 on Race Day)

17 and under Pre Registration \$15.00 Before December 4<sup>th</sup>, 2009 (20.00 on Race Day)

FREE 300 meter kids fun Run

All proceeds from The Sugar Land Christmas Run will benefit The C Different Foundation.



Mailed-in registrations must be RECEIVED five days prior to the dead line date. Make checks payable to CDIFFERENT and mail to: 3011 N BLUE MEADOW CR., SUGAR LAND, TX 77479

## WAIVER AND RELEASE OF LIABILITY THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS. PLEASE READ CAREFULLY BEFORE SIGNING.

ASSUMPTION OF RISK FOR BODILY OR PERSONAL INJURY AND ILLNESS. I voluntarily wish to participate in The Sugar Land Christmas Run C5K (the "Event(s)"). I know that running on trails and fire roads is a potentially hazardous activity. I shall not enter and run in the Event(s) unless I am medically able and properly trained. I agree to abide by any decision of an Event(s) official relative to my ability to safely complete the Event(s). I assume all risks associated with participating in the Event(s) including, but not limited to, high heat and/or humidity, rainy or wet conditions, the conditions of the trails, all injuries or death that may be suffered by me before, during, or after the Event(s), all such risks being known and appreciated by me. I understand that the Event(s) involves trails, away from medical services, and that there are rattlesnakes, mountain lions, ticks, poison oak, and other potentially dangerous and harmful elements in the area. Knowing these facts, and in consideration of your acceptance of my Event(s) entry, I, the undersigned participant (and if participant is under 18 years of age, I, the parent or guardian of participant), for myself, my marital community, heirs, personal representatives, and assigns, hereby waive, covenant not to sue, RELEASE and DISCHARGE The CDIFFERENT FOUNDATION, Acumen Contracting Group, City of Sugar Land, Eldridge Park, and all of their directors, officers, employees, volunteers, sponsors, representatives and agents (collectively, the "Event(s)" Parties) from any and all liability, loss, damage, claim, action or demand arising from or attributable to my participation in and travel to and from this Event(s), including, but not limited to, liability that may arise out of negligence or carelessness of the Event(s) Parties. I attest that I am physically fit and sufficiently trained for this, my physical condition verified by a licensed M.D. during the last 6 months.

PUBLICITY. I hereby release to the Event(s) Parties full and exclusive rights to record my performance in this race on film, videotape, or still photography for use without compensation to me. I also agree to receive email updates and communications.

NO REFUNDS. I understand that the entry fee is non-refundable and non-transferable. I also understand the Event(s) will take place rain or shine, at Race Director's discretion. Race may also be postponed due to natural hazards uncontrollable by Race Director. If race is postponed for any reason, there are no refunds and entry fee will be forwarded to the rescheduled date.

I have carefully read and fully understand this agreement. I am aware that this is a release of liability, a promise not to sue, and a contract between my self and the Event(s) parties that will bind my marital community, heirs, personal representatives, assigns, and all members of my family, including any minors, and I sign this agreement of my own free will.

PRINT NAME: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

Parent or legal guardian if participant is under 18 years of age:

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_