

SEXUAL ASSAULT AWARENESS AND PREVENTION MONTH

5K FUN RUN / WALK REGISTRATION FORM

NAME:

PHONE:

EMAIL:

GENDER:

AGE:

MILITARY MEMBER

MILITARY SPONSOR

MILITARY MEMBERS: Would you be interested in becoming a Victim Advocate for the Sexual Assault Response program?

Assumption of Risk, Release and Waiver: I am aware that participating in the Run/Walk can be a dangerous activity involving many risks of injury. I understand that the dangers and risk of participating in the above event include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, aggravation of underlying diseases which could result in illness such as a heart attack or stroke, and serious injury or impairment to other aspects of my body, general health and wellbeing. I understand that the dangers and risk of participating in the above event may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy living.

Because of the dangers of participation in the above event, I recognize the importance of following rules and regulations established by the event planning staff and agree to obey such instructions. I acknowledge that I am in good physical condition and do not know of any condition or reason that I should not be able to participate in the Run/Walk. I recognize and acknowledge that the Idaho National Guard and the Idaho Military Division does NOT carry special health insurance that would provide such special insurance coverage for me in the event I should sustain an accidental injury while participating in the Run/Walk.

I understand the risks involved in this activity and I am voluntarily participating in the Run/Walk. By my signature below, I hereby recognize and assume all risks associated with playing Run/Walk, waive any claim that I might have arising out of this activity, and agree to release and hold harmless the Idaho National Guard and the Idaho Military Division, its employees, agents, representatives, and volunteers harmless from any and all obligations, liabilities, claims, demands, costs, and expenses, including attorney's fees, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to the event of Run/Walk. The terms hereof serve forever as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

The invalidity of any portion of this Agreement shall not affect the remaining portions. In signing this Waiver, I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from this Waiver have been made.

I consent to my photo being used for social media posts promoting this event.

SIGNATURE:

DATE:

Under 18? Have your parents/legal guardian sign here:

It is strongly recommended that each participant be enrolled in insurance which covers accidents that may occur during participation in activities

Please submit registration form to Sean Egbert at sean.t.egbert.mil@mail.mil or SARC/SAPR Office, Gowen Field Bldg 270.