



Adult: \$25 Cash ___ Check # _____ *\$30 Day of registration
 Child: \$15 Cash ___ Check # _____
 Team: \$85 Cash ___ Check # _____ *No day of team registration

Drop off or mail to: Schuylkill County's VISION
 11 East Main Street, Schuylkill Haven, PA 17972
 Questions? info@schuylkillvision.com

Schuylkill County's VISION's 2021 Spooky Schuylkill 5k Registration Form
www.schuylkillvision.com/spooky-schuylkill-5k.html

October 30, 2021

Runner's Information:

Last Name: _____

First Name: _____

[] Male [] Female Age: _____ Birthdate: _____

Address: _____

City: _____ State: _____

Zip: _____ Email: _____

Emergency Contact: _____

Phone: (____) _____

Shirt Size (Register by October 10, 2021 to guarantee size and availability): _____

- I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that there will be traffic on the course and assume the risk for running in traffic. I also assume any or all other risks associated with running or attending the race including but not limited to falls, contact with other participants, the effects of the weather and the condition of the roads, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge Schuylkill County's VISION and any subcontractors it utilizes, all municipalities in which the race is held, the race committee, volunteers, any and all sponsors including their agents, employees, assigns or anyone acting for on their behalf, or anyone else associated in any way with the race, from any or all claims or liability for death, personal injury or property damage of any kind of nature what so ever arising out of, or in the course of, my participation in this event(s). This waiver extends to all claims of every kind or nature what so ever, foreseen or unforeseen, known or unknown.
- Schuylkill River Greenway Association: As a participant in an activity on property under the jurisdiction of the Schuylkill River Greenway Association (SRGA), the undersigned hereby releases, discharges and agrees to hold harmless the SRGA, its agents, employees, officers, and successors, from all liability, claims, actions, demands, and judgments which I, the undersigned, may have against the SRGA or its successors from all personal injuries, known or unknown or injuries to other persons caused by or arising out of any action I might take relating to my activities. I recognize there are inherent dangers in any outdoor activity involving tools, equipment, activities and events, and/or cooperative work with others, and agree to inform myself of these dangers and take reasonable precautions to avoid being harmed by them.
- Photo Release: I hereby give permission for my photograph to be taken during the activity and for Schuylkill County's VISION and the Schuylkill River Greenway Association to use my photographic image in commercial or noncommercial publicity for the event, for Schuylkill County's VISION, Schuylkill River Greenway Association and for their activities.

Please check disclaimer and release statements above and sign below.

Participant's Name: _____

Signature: _____

Signature of Parent or Guardian (if under 18 years old): _____



<https://www.schuylkillvision.com>

Trick or Treat... Move your Feet!