

THE 15TH ANNUAL
GREAT HUMAN RACE
*REGISTRATION FORM FOR COMPETITIVE RUNNERS AND
WALKERS*

(PLEASE PRINT)

LAST NAME _____

FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____

HOME PHONE _____

SCHOOL OR EMPLOYER _____

SEX: MALE FEMALE DATE OF BIRTH _____ AGE ON RACE DAY

ENTRY FEE: 5K COMPETITIVE RUN/WALK \$20 IF REGISTERED BY MARCH 25
\$25 IF REGISTERED AFTER MARCH 25

EACH REGISTERED RUNNER/WALKER WILL RECEIVE A T-SHIRT WITH PACKET PICKUP

ENTRY FEE ENCLOSED \$ _____

VOLUNTARY DONATION TO THE VOLUNTEER CENTER OF DURHAM \$

VOLUNTARY DONATION TO A PARTICIPATING AGENCY \$ _____

NAME OF AGENCY Triangle Wildlife Rehabilitation Clinic

PLEASE MAKE CHECKS PAYABLE TO **THE VOLUNTEER CENTER/GREAT HUMAN RACE.**
ENCLOSE FEE WITH THIS FORM AND MAIL OR DELIVER TO **THE VOLUNTEER CENTER, PO Box 3374,**
DURHAM, NC 27702-3374

RELEASE, WAIVER, INDEMNIFICATION AND ASSUMPTION OF RISK: I UNDERSTAND THAT RUNNING IS A HAZARDOUS ACTIVITY. I KNOW THAT I SHOULD NOT ENTER AND RUN UNLESS I AM MEDICALLY AND PHYSICALLY ABLE AND PROPERLY TRAINED. I ASSUME ALL RISKS ASSOCIATED WITH RUNNING IN THE GREAT HUMAN RACE ON MARCH 27, 2010 INCLUDING, BUT NOT LIMITED TO, FALLS, CONTACT WITH OTHER PARTICIPANTS, THE EFFECTS OF THE WEATHER INCLUDING HIGH HEAT AND HUMIDITY, VEHICLE TRAFFIC AND CONDITIONS OF THE ROAD, ALL SUCH RISKS BEING KNOWN AND APPRECIATED BY ME. HAVING READ THIS RELEASE AND KNOWING THESE FACTS, AND IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, I FOR MYSELF, MY HEIRS, ASSIGNS AND ANYONE ELSE ENTITLED TO ACT ON MY BEHALF, DO WAIVE, RELEASE AND HOLD HARMLESS THE VOLUNTEER CENTER OF DURHAM, THE DURHAM BULLS, THE CITY OF DURHAM, OFF N' RUNNING, AND ANY OTHER RACE SPONSORS, EVENT MANAGERS, AND ALL REPRESENTATIVES AND VOLUNTEERS FOR THE EVENT, OR THEIR SUCCESSORS, FROM ALL CLAIMS OF LIABILITIES OF ANY KIND, INCLUDING INJURY OR DEATH, ARISING OUT OF MY PARTICIPATION IN THE RUN/WALK EVEN THOUGH THAT LIABILITY MAY ARISE OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF SUCH PERSONS. I AGREE THAT THE DECISIONS OF THE RACE OFFICIALS RELATING TO RACE RESULTS AND MY PARTICIPATION IN THE RACE SHALL BE FINAL. I GIVE PERMISSION FOR THE FREE AND UNRESTRICTED USE OF MY NAME AND VIDEO FILM IMAGES AND PHOTOS TO BE USED AS NEEDED BY THE VOLUNTEER CENTER OF DURHAM IN ITS PROMOTIONAL ACTIVITIES. I ALSO AGREE TO EXERCISE ALL SAFETY PRECAUTIONS, TO AVOID LITTERING AND TO SHOW RESPECT TO THE PROPERTY OF OTHERS.

DATE _____

SIGNATURE REQUIRED PARENT SIGNATURE IF PARTICIPANT IS UNDER 18. WE RECOMMEND THAT CHILDREN BE ACCOMPANIED BY AN ADULT ON RACE DAY.