

Komen Knoxville Race For The Cure® Team Registration Form

One form per entrant. Copies are acceptable or register online at www.komenknoxville.org

I would like to be recognized as a breast cancer survivor by receiving a complimentary pink cap and T-shirt. **TEAM CAPT.**

TEAM NAME

LAST NAME MIDDLE INITIAL

FIRST NAME

ADDRESS

CITY

STATE ZIP DAYTIME PHONE - -

EMAIL

BIRTHDATE - - AGE as of 10/22/11 SEX: FEMALE MALE

*** Important ***

CHOOSE YOUR EVENT

5K Fun Run Sleep In For the Cure

CHOOSE YOUR STATUS

* COMPETITIVE RUNNER (CHIP TIMED) NON-COMPETITIVE RUNNER

CHOOSE YOUR T-SHIRT

ADULT SIZES: S M L XL XXL (Available for the first 12,500 participants)

Kids For The Cure: YS YM YL Adult Sm Bib (Available for the first 800 participants)

Kids For The Cure: Bib (Available for the first 200 participants)

PHOTOGRAPHIC AND RESULTS RELEASE and WAIVER AND RELEASE OF CLAIMS

I AGREE THAT ANY AND ALL REPRESENTATIONS MADE AND RELEASES, WAIVERS, COVENANTS, CONSENTS AND PERMISSIONS GIVEN BY ME HEREUNDER ARE GIVEN ON BEHALF OF ME AND ANY AND ALL OF MY MINOR CHILDREN OR PERSONS OVER WHOM I HAVE GUARDIANSHIP PARTICIPATING IN OR ATTENDING THE EVENT.

I give my consent and permission to The Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G. Komen for the Cure ("Komen"), its affiliates and races, their sponsors and corporate sponsors, their successors, licensees, and assigns the irrevocable right to use, for any purpose whatsoever and without compensation, (i) any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event (the "Event"); and (ii) the results of my participation in this Event (e.g., race time, name, participant number). I understand that (i) my consent to these provisions is given in consideration for being permitted to participate in this Event; (ii) I may be removed from this competition if I do not follow all the rules of this Event; and (iii) I am a voluntary participant in this Event. I am in good physical condition and am solely responsible for my personal health, safety and personal property. I KNOW THAT THIS EVENT IS A POTENTIALLY HAZARDOUS ACTIVITY AND I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT THAT MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE EVENT PREMISES (COLLECTIVELY, "MY PARTICIPATION"). TO THE FULLEST EXTENT OF THE LAW, I, FOR MYSELF, MY NEXT OF KIN, MY HEIRS, ADMINISTRATORS, AND EXECUTORS (COLLECTIVELY, "RELEASEES"), HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST (I) KOMEN, Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. D/B/A Knoxville Affiliate of Susan G. Komen for the Cure AND ALL OTHER KOMEN AFFILIATES AND THEIR RESPECTIVE DIRECTORS, OFFICERS, VOLUNTEERS, AGENTS AND EMPLOYEES; (II) ANY EVENT SPONSORS; AND (III) ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT (COLLECTIVELY, THE "RELEASEES") FOR ANY INJURY OR DAMAGES I MIGHT SUFFER IN CONNECTION WITH MY PARTICIPATION. THIS RELEASE APPLIES TO ANY AND ALL LOSS, LIABILITY, OR CLAIMS I OR MY RELEASEES MAY HAVE ARISING OUT OF MY PARTICIPATION, INCLUDING BUT NOT LIMITED TO, PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY FALLS, CONTACT WITH AND/OR THE ACTIONS OF OTHER PARTICIPANTS, CONTACT WITH FIXED OR NON-FIXED OBJECTS, CONTACT WITH ANIMALS, CONDITIONS OF THE EVENT PREMISES, NEGLIGENCE OF THE RELEASEES, RISKS NOT KNOWN TO ME OR NOT REASONABLY FORESEEABLE AT THIS TIME, OR OTHERWISE.

This Photographic and Results Release and Waiver and Release of Claims (collectively, the "Release") shall be construed under the laws of the state in which the Event is held. In the event any provision of this Release is deemed unenforceable by law, (i) Komen shall have the right to modify such provision to the extent necessary to be deemed enforceable; and (ii) all other provisions of this Release shall remain in full force and effect.

I understand that I have given up substantial rights by signing this Release, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent allowed by law.

DRUG TESTING: Participants in this competition may be subject to formal drug testing in accordance with USA T&F rules and IAAF Rule 14.4. Participants who refuse to be tested or who test positive for banned substances will be disqualified from this event and will be ineligible for future competitions.

Signature (required to process entry) Date

Race course certification number pending.

Registration Fees (ends 10/7/11)

Mail-in Registration (by Team Captain)

- Adult 5K or Fun Run: \$ 35.00
 - In the Pink: \$ 60.00
 - Sleep In for the Cure (all ages): \$ 35.00
 - Children 0 - 2 years: \$ 10.00
 - Children age 3- 12 years: \$ 25.00
 - Students age 13-18: \$ 25.00
 - * Upcharge for Competitive Runner Chip Timing: \$ 5.00
- (must add to chosen registration type above to be timed)

Online Team Registration is available at www.komenknoxville.org.

Please mail in your form for by October 7.

Hermes Sports and Events
c/o Komen Knoxville
1624 St Clair Ave
Cleveland, OH 44114

Race Day is October 22, 2011

Team registration forms MUST be mailed together for early bird by October 7.

Don't forget you may register online thru October 20.

Note: Rollerblades and pets are discouraged from participating in this Event. Thank you for your cooperation.