



Jared Coones Memorial Pumpkin 5K Run/Walk

Saturday,
October 7
8:00 AM

Running Club Registration Form

19th Annual Jared Coones Memorial Pumpkin 5K Run/Walk

Black Bob Elementary School
Olathe, Kansas
pumpkinrunwalk.org
Race information line at (913) 909-3406

One Form Per Person. Entry form may be photocopied.

19th Annual Jared Coones Memorial Pumpkin 5K Run/Walk

ONE FORM PER PERSON

SCHOOL NAME: _____ (Packets will be taken to this school)

First Name _____ Last Name _____ Birth Date: _____

Address _____ Gender: Male Female Phone: _____

City/State/Zip _____ E-Mail Address: _____

Race day entries cannot be guaranteed a T-Shirt

Fee includes T-shirt/ (circle one) Adult sizes S M L XL XXL Children sizes S M L

- Running Club price \$20/per participant
*If you are signing up at the running club price, all packets will be delivered to the school you list above.

The Jared Coones Memorial Foundation a 501(c)3 non-profit organization. Federal ID #43-1937567.
Release and Waiver (Must Sign to Participate)

I know that running a road race is potentially hazardous activity, which could cause injury or death. I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including but not limited to: falls, contact with other participants, the effects of the weather, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or roller blades, animals, and personal music players are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive, release, and discharge the Jared Coones Memorial Pumpkin 5K Run/Walk, the Pumpkin Race Planning Committee, the Foundation Board, the City of Olathe including the police department, Olathe Running Club, Black Bob Elementary School, race officials, volunteers and all event sponsors their representatives or anyone acting on their behalf, and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. This Release and Waiver extends to all claims of every kind of nature whatsoever, foreseen or unforeseen, known or unknown. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. Applications for minors will be accepted only with a parent's signature. (If a parent is signing on behalf of a minor, then the parent agrees to defend and indemnify all persons and entities listed in this Release and Waiver against any claim brought against them by that minor at any time, arising out of the minor's participation in this event.)

Make Checks Payable To:
Jared Coones Pumpkin Run
Mail completed form, signed release and check to: **Jared Coones Pumpkin Run P.O. Box 3314 Olathe, Kansas 66063-3314**

Signature _____ Date _____

Parent/Guardian Signature (if under 18) _____ Date _____