

MIDWEST ENTRY FORM

Please **PRINT** in black or blue ink. Fill out the form completely.
ENTRY WILL NOT BE ACCEPTED WITHOUT ENTRY FEE AND COMPLETELY SIGNED WAIVER FORMS. NO RACE DAY ENTRIES.

FIRST NAME

LAST NAME

<input type="text"/>	<input type="text"/>
GENDER (m/f)	BIRTHDATE

EMAIL ADDRESS

<input type="text"/>	<input type="text"/>
DAY PHONE	EVENING PHONE

STREET ADDRESS OR PO BOX

<input type="text"/>	<input type="text"/>
CITY	STATE

<input type="text"/>	<input type="text"/>
COUNTRY	ZIP CODE

EMERGENCY CONTACT NAME ON SATURDAY, NOVEMBER 30, RACE DAY

<input type="text"/>	<input type="text"/>
EMERGENCY CONTACT PHONE	AGE OF ENTRANT (on 8/1/2019)

<input type="text"/>	<input type="text"/>
Personal best 5000 meter time in 2018: (Required for race placement)	Min. Sec.

HIGH SCHOOL or YOUTH TEAM (Open Race entrants not required)

<input type="text"/>	<input type="text"/>
GRADE	COACH'S NAME (circle one) Mr. Ms.

COACH'S EMAIL ADDRESS (Open Race entrants not required)

How did you find out about Foot Locker Cross County Championships?

- | | |
|--|---|
| <input type="checkbox"/> School Sports | <input type="checkbox"/> FLCCC website |
| <input type="checkbox"/> High School Coach | <input type="checkbox"/> Ran previously |
| <input type="checkbox"/> Summer Camp | <input type="checkbox"/> Internet site |
| <input type="checkbox"/> Teammates | <input type="checkbox"/> CC Meet |
| <input type="checkbox"/> Other _____ | |

What running websites do you visit?

- Enclosed is \$15 early bird fee by 10/1
- Enclosed is \$20 entry fee by 11/1
- Enclosed is \$25 entry fee by 11/22
- Enclosed is \$30 late fee by 11/27

TOTAL AMOUNT ENCLOSED:

Mail to: Foot Locker Cross County Championships, P.O. Box 1346, Racine, WI 53401

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____, am the parent or legal guardian of _____ ("Child"). In consideration of the opportunity for my child to participate in the Foot Locker Cross Country Championships and all related events or activities held in conjunction with these championships ("the Event") to be held approximately November 30, 2019 at Univ. of Wisconsin-Parkside, located in northern Kenosha County, Wisconsin, I agree as follows:

I hereby agree:

- To waive and forever release any all claims or action of any kind whatsoever that I or my Child may have against Foot Locker Retail, Inc., New Balance Athletics, Inc., Eastbay Inc., their parents, subsidiaries, affiliates and their respective officers, directors, employees, representatives and agents for injuries, damages or losses to persons, including myself and my Child, and property which may be sustained, in whole or in part, directly or indirectly in connection with my Child's participation in the Event, while preparing for, participating in and/or traveling to the Event;
- I represent and warrant that my Child is in good physical condition and is able to safely participate in the Event. I am fully aware of the risks and hazards inherent in participating in the Event and hereby voluntarily elect to allow my Child to compete in the Event, knowing the risks associated with the Event.
- I also attest that my Child is currently a high school student and will not have reached his/her nineteenth (19th) birthday before August 1, 2019;
- I agree to the use of my Child's name, picture, portrait, likeness, and voice for advertising and promotional purposes without further consideration (unless prohibited by law);
- I understand that my Child will be disqualified if he/she runs in the Event without his/her assigned number;
- **I hereby declare that the assumption of risk, waiver and indemnification covenants made in this release agreement were voluntarily entered into with the full knowledge of the effects of these provisions; and**
- The provisions of this release agreement will be binding on my Child, heirs and personal representatives, as well as me.

All participants complete bottom waiver, including Open Race runners

I, Participant _____ in consideration of the opportunity to participate in the Foot Locker Cross Country Championships and all related events or activities held in conjunction with these championships ("the Event") to be held approximately November 30, 2019 at Univ. of Wisconsin-Parkside, located in northern Kenosha County, Wisconsin, I agree as follows:

I hereby agree:

- To waive and forever release any all claims or action of any kind whatsoever that I may have against Foot Locker Retail, Inc., New Balance Athletics, Inc., Eastbay Inc., their parents, subsidiaries, affiliates and their respective officers, directors, employees, representatives and agents for injuries, damages or losses to persons, including myself, and property which may be sustained, in whole or in part, directly or indirectly in connection with my participation in the Event, while preparing for, participating in and/or traveling to the Event;
- I represent and warrant that I am in good physical condition and am able to safely participate in the Foot Locker Cross Country Championships. I am fully aware of the risks and hazards inherent in participating in the Event and hereby voluntarily elect to compete in the Event, knowing the risks associated with the Event.
- I also attest that I am currently a high school student and will not have reached my nineteenth (19th) birthday before August 1, 2019. **This statement does not apply to Open and Youth 3K participants;**
- I agree to the use of my name, picture, portrait, likeness, and voice for advertising and promotional purposes without further consideration (unless prohibited by law);
- I understand that I will be disqualified if I run in the Event without my assigned number;
- **I hereby declare that the assumption of risk, waiver and indemnification covenants made by me in this release agreement were voluntarily entered into by me with the full knowledge of the effects of these provisions; and**
- The provisions of this release agreement will be binding on my heirs and personal representatives, as well as me.

Both signatures are required in order for participant to compete.

X _____
 Signature of Parent/Guardian Date

Print Name Date

X _____
 Signature of Participant Date

Print Participant's Name Date