

MAIL-IN REGISTRATION FORM

Vermont 10 Miler, Sunday November 1, 2020



Gender: Female Male **Date of Birth:** / /

First Name:

Last Name:

Email:

Address:

City: **State:** **ZIP/Postal code:**

Contact Phone: () - **Shirt Size:** S M L XL XXL

Emergency Contact Name:

Emergency Contact Phone: () -

Vermont 10 Miler	
<input type="checkbox"/>	\$55 thru January 31
<input type="checkbox"/>	\$60 February 1 thru March 31
<input type="checkbox"/>	\$65 April 1 until June 30
<input type="checkbox"/>	\$70 July 1 until October 28

In consideration of my participation in the Vermont 10 Miler on 11/1/2020 (the "Event"), I, for myself, my heirs, executors, and administrators do hereby waive and release any and all rights, claims and causes of action I have or may have against the Stowe Land Trust, Gray Matter Marketing, LLC, the Town of Stowe, the State of Vermont, their agents, employees, all event sponsors, volunteers, race officials, organizers, as well as any other association connected with this event, its representatives, successors and assigns ("Event Organizers") that may arise as a result of my participation in the Event. I further agree to defend, indemnify and hold harmless Event Organizers from and against any and all personal injuries, damages, losses, causes of action, liabilities and expenses resulting or which may result from my participation in the Event on 11/1/2020 and/or the condition of the raceway, property, facilities or equipment used for the Event. I also grant full permission to all Event Organizers to store, use, license and reproduce the use of my name, likeness, voice, image, motion pictures, recordings or photograph of me, in any media or in any manner, including any electronic media for any legitimate commercial or business purposes, including advertising purposes. In consideration of this entry being accepted, I hereby for myself, heirs, executors, administrators, waive and release any and all right and claim for damages I may have against the R.I. Department of Environmental Management, the State of Rhode Island, their agents, representatives, successors, Employees and assigns for any and all injuries suffered by Me at said event or while traveling to our returning there from save those proximately cause by the willful Tortuous acts of the state, its agents, servants and its employees. In addition, I hereby acknowledge that I am 18 years of age or older or, if applicable, that I am the parent or legal guardian of a child under the age of 18 who I am registering for the Event. I recognize the risks involved in my participation in the Event and do hereby expressly assume all known and unknown risks. I am physically fit and have sufficiently trained for this Event. Now, therefore, in consideration of the granting of such permission as requested, the undersigned, for him/herself, him/her heirs, executors, administrators and assigns, has released and forever discharged, and does hereby release and forever discharge, the Event Organizers or its agents, servants, and employees, from any and all liability or responsibility for the death, or personal injury to, the undersigned and/or for any and all loss of, or damage to, any property of the undersigned, while in upon, about or near such structure of the premises where such work is located, whether or not such death, injury, loss of damage, shall have been caused or may be alleged to have been caused, by the negligence of the Event Organizers, its agents or employees, the condition of the premises, other work being conducted for the Event Organizers, or from any other cause whatsoever; further for the said consideration, the undersigned hereby undertakes and agrees to indemnify the Event Organizers and save the Event Organizers harmless from and against any and all liability, loss suits, damage, cost and expense, including legal fees, in any way related to the granting of said permission, as requested.

Signature (Parent or Guardian must sign if entrant is under 18 years old) _____

Date _____

