

2020 GREYHOUND GALLOP REGISTRATION FORM / WAIVER

NAME _____ AGE ON RACE DAY _____ (CIRCLE ONE) MALE FEMALE

IF YOU ARE A STUDENT, WHO IS YOUR TEACHER AT GARRISON MILL? _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

RACE NAME _____ RACE DISTANCE _____ SHIRT SIZE _____

FEE PAID _____ (circle one) CASH CHECK CREDIT CARD

IN CONSIDERATION OF THIS ENTRY I WAIVE ANY AND ALL CLAIMS FOR MYSELF AND OR MY HEIRS FOR ANY INJURIES I MAY INCUR AS A RESULT OF MY PARTICIPATION IN THE GARRISON MILL GREYHOUND GALLOP 1K/5K AND GIDDY UP GALLOP FUN RUN , THEREBY RELEASING RUN FOR IT! PRODUCTIONS, COBB COUNTY, GARRISON MILL ELEMENTARY SCHOOL, ALL SPONSORS AND VOLUNTEERS ASSOCIATED WITH THIS EVENT FROM LIABILITY. I UNDERSTAND THAT JOGGING/RUNNING IS A STRENUOUS SPORT AND I FURTHER STATE THAT I AM IN PROPER PHYSICAL CONDITION FOR THESE EVENTS. EVENTS WILL HAPPEN RAIN OR SHINE. NO REFUNDS WILL BE GIVEN, AND NO TRANSFERS ALLOWED!.

Signed (parent or guardian if under 18) _____ Date _____

BIB # _____