



# St. Michael Daze & Knights Festival

3<sup>rd</sup> Annual



## 5K COLOR DAZE RUN

**ONLINE REGISTRATION WAIVER**

Registration 7:00am -- Run starts at 8:30am

Start location by St. Michael City Hall

Ages 6 and up

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

### All Participants-----Waiver & Release of all claims and assumption of risk

WAIVER. Knowing that running this run is a potentially hazardous activity, I enter and participate in this run certifying that I am medically able and properly trained. I also know that there will be traffic on the course route. I assume the risk of running in traffic. I also assume any and all other risks associated with running this event including but not limited to falls, contact with other participants, the effects of weather, including high heat and/or humidity and condition of the roads. Knowing these facts, and in consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release, and discharge all sponsors and organizers of the St. Michael Daze & Knights Festival, and any other organization associated with the run, run officials, volunteers, any and all sponsors including their agents, employees, assigns or anyone acting for or on their behalf, from any and all claims or liability for death, personal injury, or property damage of any kind or nature arising out of, or in the course of, my participation in this event. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. I have read the foregoing and certify my agreement by submitting this entry and/or my signature below.

1. I understand that participating in 5K Color Daze Run is a potentially hazardous activity where powdered color will be thrown at and around me during the course of the event.
2. I agree not to participate unless I am medically and physically able, which I am solely responsible to determine.
3. I agree to abide by any decision of a run official relative to my ability to safely complete the run, which decision is at the sole discretion of the run official and I agree lack of a decision does not create any liability whatsoever.
4. I assume all risks associated with competing in 5K Color Daze Run, including, but not limited to, slips, falls, contact with other participants, negligent or wanton acts of other participants, any defects or condition of premises, or color zones, the effects of the weather including high heat, cold temperatures, storms and/or humidity. All such risks being known, assumed and appreciated by me.
5. I agree that St. Michael Daze & Knights Festival is not responsible for any personal items or property that are lost, stolen, stained or damaged at or during the event.
6. I consent to emergency medical care and transportation in order to obtain treatment in the event of injury to me as medical professionals may deem appropriate. This Assumption and Release extends to any liability arising out of, or in any way connected with, the medical treatment and transportation provided in the event of an emergency.
7. I understand and agree that pets are not permitted to accompany me in the run, and children under the age of 6 are not permitted to participate or accompany me in the run.
8. I grant permission to St. Michael Daze & Knights Festival, its affiliates and sponsors to use any photographs, motion pictures, recordings or any other record of this event for any purpose including, but not limited to, promoting, advertising and marketing purposes. Any and all photographs, motion pictures, recordings or other records of the event are the sole property of St. Michael Daze & Knights Festival.
9. I agree to indemnify St. Michael Daze & Knights Festival, its affiliates and assigns, from any and all third party claims caused in whole or in part by my actions
10. I understand that some of the course may go through water, colored corn starch or mud, which has not been tested for chemicals or disease.
11. I assume risk of wild animals and insects that may be present on the course.

**I understand and agree to all of the above- (If under 18 must have parents signature)**

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_