



EVENT REGISTRATION FORM

KD Park Burlington, WI
Saturday, October 20th, 2018 6:00 p.m.
Complete form; acknowledge waiver agreement, sign, and date.

☐ Individual \$29.00

Mail to: Kenosha Running Company PO Box 126 Kenosha WI 53141

***Make check payable to Kenosha Running Company Inc.

<http://www.xcthrilllogy.com> (262)925-0300

☐ Couple* \$52.00

*couple is husband/wife, parent/minor child, or
partners living in same household.

For more information or to register online visit:

<http://www.xcthrilllogy.com/trails-are-alive-night-adventure.html>

Additional fees may apply

Indicate distance(s): _____

Optional Donation to Kenosha County Parks. \$ _____

Full Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Age on Event Date: _____

Male or Female

Additional Athlete Name: _____ Male or Female

Email: _____ Age on Event Date: _____

In consideration for my entry in the Trails Are Alive Night Adventure and Relay(a Kenosha Running Company event) I, intending to be legally bound, do hereby for myself, heirs, executors, and assigns, waive, release, and forever discharge any and all rights and claims for damages which I may have or which may hereafter occur to me against the Kenosha Running Company, Inc. or any subsidiary or political division thereof, all other cooperating agencies in this race, its or their respective officers, agents, representatives, successors, assigns, and sponsors for any and all damages which may be sustained and suffered by me in connection with my association with or entry to participate in the Trails Are Alive Night Adventure.

I give Kenosha Running Company, their assigns, licensees, and legal representatives, the irrevocable right to use my picture, portrait, photograph, or video in all forms, media and manners, without restriction as to the changes or alterations, for advertising, trade, promotion, exhibition, or any other lawful purposes. I waive the right to inspect or approve the photographs or electronic matter that may be used in conjunction with them now, or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of said images.

I have read, understand, and agree to this waiver:

Signature: _____

Additional Signature: _____

Signature Parent/Guardian (if under 18): _____