

Skeeter Beater Snow Shoe Race 5K / 10K March 2, 2019 Registration Form

Name:			
Address:			
Phone:			
E mail:			
E-mail:			
5K 10K			
M/F:	Age:	Shirt Siz	e:
Registration	7.90	J J.	<u>Categories:</u>
\$30 Adult			16 and under
\$20 Student			17-35
\$15 Child (under	16)		36 and up

Races will be held on Lake Lomond in Bagley, MN. Registration will begin at 9:00 am, at the city park lake entrance. Race starts at 10:00 am. Awards and Chili feed after race at: Fireside Grill & Patio

The Farm By The Lake 17797 366th St Bagley, MN 56621

Phone 218-694-2084 Email: farm@farmbythelake.org

Liability Release Form

This agreement releases **The Farm By The Lake** from all liability relating to injuries that may occur at the **Skeeter Beater Snow Shoe Race** on Lake Lomond in Bagley, MN, on March 2, 2019. By signing this agreement, I agree to hold **The Farm By The Lake** entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in Snowshoeing. These include but are not limited to overall health issues, exposure to the outside weather conditions, tripping, falls, strained muscles, and broken bones.

I swear that I am participating voluntarily, and that all risks have been made clear to me.

Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, and organizers.

By signing below I forfeit all right to bring a suit against **The Farm By The Lake** for any reason. In return, I will receive permission to participate in the **Skeeter Beater Snow Shoe Race**.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant or Guardian Signature	Date