



## Scandia Run Entry Form - Saturday, August 12th, 2023, 8:00 am

Please make checks payable to VSAC and return completed form with payment to:

VSAC, P.O. Box 336, Junction City, OR 97448 (mail in registration must be postmarked by Aug. 1)

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Gender (circle one): Male Female Age on Race Day: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact on Race Day: Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Please circle if applicable: Wheelchair Racer Team Racer Team Name \_\_\_\_\_

**Select Event** (circle one): 10K Scandia Run 5k Scandia Run 4 Mile Scandia Walk Scandia Jr. 400 m

**Entry fee** (circle one): Color T-Shirt \$35 (before April 1, 2023); or \$40  
Without T-Shirt \$20 (before April 1, 2023); or \$25  
10K and 5K Child 11 and under (includes Kid's T-Shirt) \$15 (before April 1, 2023); or \$20  
Scandia Junior 400 m run (includes Kid's T-Shirt) \$12 (before April 1, 2023); or \$20

**Shirt size** (circle one): Youth: YS YM YL  
Men: Small Medium Large X-Large 2XL (add\$3) 3XL (add\$3)  
Women: Small Medium Large X-Large

### Waiver (must be signed to accept entry)

I understand that participating in a running/walking race is a potentially hazardous activity. I should not enter the Scandia Run 10k, 5k, Walk, or kids 400m unless I am medically able and properly trained. I agree to abide by any decision of race officials relative to my ability to safely complete the event. I assume all risks associated with participating in this event including but not limited to; falls, contact with other participants or traffic, the effects of weather including high heat, medical emergencies, and unforeseen circumstances. Having read this waiver, knowing these risks, and in consideration of accepting my entry, I, for myself and anyone entitled to act on my behalf waive and release, the race director, race staff, race volunteers, The Valley South Athletic Club, RRCA, all sponsors, Junction City, and their representatives and successors, from all claims or liabilities of any kind arising out of my participation in the Scandia Runs or Walks, even though said liability may arise out of my own negligence or negligence on the part of the persons named in this waiver. I grant permission for all the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent or guardian (if under 18 on race day): \_\_\_\_\_ Date: \_\_\_\_\_