



R.A.T. Race Cedar City

Saturday, June 14th, 2025

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**Location:**

Main Street Park, Downtown Cedar City, UT

200 N Main St, Cedar City, UT 84721

"Stand-a-walk-a-run-a-bike-a-thon" Date: June 14th, 2025

Time: Anywhere between 6:00 AM-9:00 AM

(Give yourself plenty of time to complete your kilometer or hourly goal!)

Participant Details

Full Name *

First Name

Last Name

Activity *

☐

Volunteer For Justice

☐

Stand For Justice

☐

Walk For Justice

☐

Run For Justice

☐

Bike For Justice

"-Athon" Goal *

☐

Kilometer(s)

☐

Hour(s)

Length in kilometers or hours .
blanks

Age

Date of Birth *



Date

Email *

example@example.com

Phone Number *

-

Area Code

Phone Number

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Emergency Contact Person *

First Name

Last Name

Emergency Contact Phone Number *

Area Code

Phone Number

Relationship to Emergency Contact

Extra Donations

If you would also like to donate, in collaboration with your sponsors, as a participant or volunteer, please use the PayPal address below to send any amount you wish to the cause. Simply copy and paste it in your browser's address bar. Please specify that the donation is for the R.A.T. Race in the "Special Instructions" section of the PayPal donation form.

If paying by check, please make checks payable to CHANGE A DESTINY. There will also be someone available to collect extra online/cash/check donations at the event.

[https://www.paypal.com/donate?](https://www.paypal.com/donate?token=4iu2OSGQly9tcHKfBmwN2lhxChjITwcmUoeYh3QyCYtAlh3Db1ma0sX-MHII7L-pXnm7pAxPrIsFol9n)

[token=4iu2OSGQly9tcHKfBmwN2lhxChjITwcmUoeYh3QyCYtAlh3Db1ma0sX-MHII7L-pXnm7pAxPrIsFol9n](https://www.paypal.com/donate?token=4iu2OSGQly9tcHKfBmwN2lhxChjITwcmUoeYh3QyCYtAlh3Db1ma0sX-MHII7L-pXnm7pAxPrIsFol9n)

Waiver & Release

*

- ☐ I confirm that I am in good shape, health, and condition to participate in my selected activity.
- ☐ I don't have any medical condition or medical history that will cause me harm during my selected activity in this event.
- ☐ I will follow the rules and regulations of the "-Athon" event.
- ☐ I acknowledge that this event requires physical activity and there are possible risks and danger.
- ☐ I release the event organizers for any responsibility in case of an accident, illness, injury or death.
- ☐ I allow photos that may or may not have me in them to be taken during the event.
- ☐ I confirm that all information in this registration form is accurate and true.

I allow photos from the event with me in them to be used for event advertising and marketing. *

- ☐ Yes
- ☐ No

Participant's Signature *

Powered by **Jotform Sign**

Clear

Date Signed *

mm-dd-yyyy

Date

Parent/Guardian Signature (If participant is below 18 years old and/or not his/her own guardian.) (If you are above 18 years old and are your own guardian, please sign again with the same signature from above.) *

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Clear

Submit