Please accept my entry in the High 5 at Hanging Rock (“the Event”) on April 4, 2020. In consideration of your acceptance of my entry, and intending to be legally bound for myself, my heirs, my executors, and my administrators, I do hereby forever waive, release, and fully discharge any and all claims of any kind whatsoever arising from or as a result of death, personal injury, or property damage which I may have, or which may hereafter accrue to me, as a result of my presence at or participation in the Event. This waiver and release is intended to discharge in all ways and for all time the following: Friends of Sauratown Mountain members and their heirs, agents, executors, all sponsors (and their respective agents, employees, heirs, executors), Hanging Rock State Park, and all officials, volunteers, municipalities or public entities (and their respective agents and employees) from and against any and all liabilities of any kind whatsoever arising in, from, during or as a result of the Event, even though such liability or alleged liability may arise out of or allegedly result directly or indirectly from acts of negligence or carelessness on the part of some or all of the persons or entities that are mentioned above. I understand and willingly acknowledge that serious accidents occasionally happen during hiking and running events and that participants in such events occasionally sustain mortal or serious injuries and/or property damage, as a consequence thereof. Knowing and understanding these risks, nevertheless, I hereby agree to assume those risks and all other risks of any kind whatsoever associated with participating in the Event and I do hereby release and hold harmless all of the persons and entities who might otherwise be liable to me (or to my heirs or assigns) for damages. It is further agreed and understood by me that this waiver, release and assumption or risk is to be binding on all my heirs, executors, and assigns. I also agree and understand that any sponsor may subsequently use for publicity and/or promotional purposes my name and/or picture of me participating in this Event without obligation or liability to me and without the necessity of obtaining any additional permission. I understand that entry fees are nonrefundable. **I HAVE READ THE ENTRY FORM INFORMATION PROVIDED AND CERTIFY MY UNDERSTANDING AND COMPLIANCE BY MY SIGNATURE BELOW.**

Signature of entrant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian if under 18\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# REGISTRATION fee $35 (Add $15 for dog registration) (Checks Payable to Friends of Sauratown Mountains) Mail to Friends of Sauratown Mountains, PO Box 353, Danbury, NC 27016

## Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_ Sex: M F Route: 10 mile 5 mile

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

T shirt size: X Small Small Med Large XL 2XL 3XL Youth\_\_\_\_\_\_\_\_\_

How did you first hear about our event? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you spending the night in the area before or after the event? Yes No