

2022 TURKEY TROT Registration Form

MAKE CHECKS PAYABLE TO: SWEAT RUNNING CLUB

Mail to 19121 W. Niles Lane, Redding, CA 96002

Last name: _____ First name: _____

Age on race day: _____ Gender: Male Female

Email: _____ Phone (MANDATORY) _____

Street address: _____

City: _____ State: _____ Zip: _____

Choose a race to enter: EARLY REG THROUGH OCTBER 31ST. AFTER THAT ADD \$5.00

6MILE RUN **\$22.00** 2 MILE Walk **\$22.00** DIESTLEHORST DASH **FREE** (WAIVER MUST BE SIGNED)

Optional SWEATSHIRT ADD **\$25.00**

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WAIVER

I know that running a road race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to falls, physical contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators including the potential the contraction of a communicable disease resulting from contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators. I assume all risks including: the effects of the weather; high heat and/or humidity; freezing cold temperatures; traffic and the conditions of the road including surrounding terrain. [

Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Turkey Trot, the City of Redding and the SWEAT Running Club, event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

Signature (parent/guardian if under 18): _____

Date: _____

AMOUNT PAID \$ _____