



## SCHOOL REGISTRATION FORM

|   |   |   |
|---|---|---|
| <b>All Proceeds to Benefit the Walton Education Foundation</b>  |   |   |
| (Please Print)  |   |   |
| Race Date: Saturday, February 3 <sup>rd</sup> , 2018  | <input type="checkbox"/> 5K/10K Student Cost: \$20<br><i>(Includes Medal &amp; T-shirt)</i> | <input type="checkbox"/> 5K/10K Student: \$5<br><i>(Medal only)</i> |
| <b>RUNNER INFORMATION</b>   |   |   |
| Last Name:  | First:  |   |
| Birth date:   | Age:  | Sex: <input type="checkbox"/> M <input type="checkbox"/> F          |
| Email Address:  | Cell Phone Number:  |   |
| School:   |   |   |
| T-Shirt Size <i>(if applicable)</i> :   |   |   |
| <b>IN CASE OF EMERGENCY</b>   |   |   |
| Parent/Guardian:  |   |   |
| Contact Number: (        )  |   |   |
| <p>I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I assume all risks associated with running in this event including, but not limited to, falls; contact with other participants; the effects of weather, including high heat and/or humidity; traffic; and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the official sponsors Walton Education Foundation, Inc., Hammock Bay and the City of Freeport from all claims or liabilities or any kind of arising out of my participation in the Apple Classic Run 5K/10K. I further state that I am in proper condition to participate in this event.</p> |   |   |
| Runner/Guardian Signature:  | Date  |   |

*The 7<sup>th</sup> Annual Apple Classic will be held in Freeport, FL at Hammock Bay on February 3<sup>rd</sup>, 2018 at 9am. Packet Pickup Begins at 7:30 am.*