

HBFD10k 2017

official use: Bib #

EVENT: RUN WALK

FIRST NAME _____

LAST NAME _____

MALE FEMALE AGE _____

CITY _____

PHONE _____

EMAIL _____

ENTRY FEES (per individual):

Age 17+: \$25 race day \$ _____

Age 16&U: \$15 race day \$ _____

BC Athletics competitive members deduct \$3. \$ - _____

2017 BC Athletics # _____

Donation to HMBVFA: \$ _____

Entry Fee payable to Sunshine Coast Athletics. Donations payable to Halfmoon Bay Volunteer Firefighters Association.

TOTAL \$ _____

ADDITIONAL FAMILY MEMBERS:

NAME M/F AGE BIB

WAIVER—MUST BE SIGNED BY PARTICIPANT OR PARENT/GUARDIAN IF UNDER 19:

In consideration of you permitting me to participate in this event, I hereby, for myself, executors, administrators and personal representatives, release the organizers of this event, their agents, HBVFD, B.C. Athletics, volunteers and the event sponsors from all liability, and I waive, as against the organizers, agents, HBVFD B.C. Athletics, volunteers and event sponsors, all claims of any kind whatsoever I may have for personal injuries or property losses suffered by participation in this event. I certify that I have full knowledge of the risks involved in this event and I am physically fit and able to participate, and that unless indicated to the contrary by the signature of parent/guardian below, I am 19 years or older.

SIGNATURE _____ DATE _____

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