



# 5K Walk @ El Camino Registration Form - 2019

**ALL PARTICIPANTS MUST READ AND SIGN. PLEASE READ CAREFULLY BEFORE SIGNING THIS WAIVER AND RELEASE FROM LIABILITY.**

**Photo/Video Waiver:** I grant to Ibero American Development Corporation, Conkey Cruisers, and Genesee Land Trust (Event Organizers), the right to take photographs/video of me and my family in connection with the above-identified event. I authorize the Event Organizers, their assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that the Event Organizers may use such photographs/video of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

**WAIVER:** I know that participating in this walk involves potential risks which could cause injury or death. By my signature, I certify that I am medically able to perform this event. I agree to abide by any decision of an event 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 assume all risks associated with participating in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, sidewalk, and trail, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, I, for myself and anyone entitled to act on my behalf, waive and release Ibero American Development Corporation, and all 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 HEREBY CERTIFY THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.**

**Group or Family Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

NAME	ADDRESS	M/F	*Age Range (See bottom of form)	SIGNATURE (Parent's Signature If under 18)
Example: John Brown	1 Clifford Avenue, 14621	M/F	<b>D</b>	<i>John Brown</i>
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		
		M/F		

\*Select an Age Range number for each participant, enter bolded # in box above:

**A** = 0-5    **B** = 6-12    **C** = 13-18    **D** = 19-25    **E** = 26-40    **F** = 41-60    **G** = 61-80    **H** = 81+