

CHICK-FIL-A 10K/5K RACE REGISTRATION FORM

To register, please fill out this form and mail to:
Flat-Out Events 11843-B Canon Blvd. Newport News, VA 23606
Must Be Received By: May 1, 2016

First and Last Name

Name to print on bib

Male

Female

Address

City

State

Zip

10K

5K

Fun Run

Email

Phone

Birth Date (mm/dd/yy)

Emergency Contact Name

Emergency Contact Phone

Relationship

S

M

L

XL

Shirt Size

I recognize that my attendance at, preparation for or participation in the Event may be a DANGEROUS or HAZARDOUS ACTIVITY, which involves known and unknown risks of serious personal injury, including death, and damage to or loss of real or personal property. I am voluntarily registering myself to participate in the Event, despite the known and unknown risks of serious personal injury, including death, and damage to or loss of real or personal property presented by my attendance at, preparation for or participation in the Event. I understand and agree that this Release is a general release barring me and my family members, legal representatives, executors, heirs, next of kin, successors, beneficiaries and assigns from bringing any claims against the Released Parties for personal injuries, including death, and/or damage to or loss of real or personal property, if such claims in any way relate to my attendance at, preparation for or participation in the Event. I know my capabilities and limitations and I will not attempt to exceed those capabilities in attending, practicing for or participating in the Event. THEREFORE, for good and valuable consideration, including being permitted to attend, prepare for and participate in the Event, I expressly and freely agree as follows: 1. To ASSUME ALL RISK of serious personal injury, including death, and/or damage to or loss of real or personal property resulting from, arising out of or in any way connected with my attendance at, preparation for or participation in the Event. 2. To inspect the area used for preparing for or participating in the Event prior to my preparing for or participating in any way in the Event. 3. To RELEASE, WAIVE and FOREVER DISCHARGE any and all claims, losses, demands, damages, costs, expenses, lawsuits, causes of action and judgments that I now or hereafter may have or claim to have against the Released Parties resulting from, arising out of or in any way connected with my attendance at, preparation for, participation in the Event or any related event, including but not limited to, any claims or damages for personal injuries, including death, and/or damage to or loss of real or personal property, whether caused in whole or in part by the NEGLIGENCE and/or FAULT of the Released Parties or otherwise. 4. To INDEMNIFY, DEFEND, and HOLD HARMLESS the Released Parties from any and all claims, losses, demands, damages, costs, expenses (including attorneys' fees), lawsuits, causes of action and judgments for personal injuries, including death, and damage to or loss of real or personal property, whether foreseen or unforeseen, present or future, known or unknown, resulting from, arising out of or in any way connected with my attendance at, preparation for, participation in the Event or any related event, whether caused in whole or in part by the NEGLIGENCE and/or FAULT of the Released Parties or otherwise. 5. That I hold a valid personal health insurance policy sufficient in amount to cover any and all circumstances which may arise from my attendance at, preparation for or participation in the Event. 6. That I am in good health and there are no physical conditions that would prevent me from attending, preparing for or participating in the Event. 7. That I am 18 years of age or older. 8. That this Release shall be interpreted in accordance with the laws of the Commonwealth of Virginia and any dispute regarding the enforceability of this Release shall be filed in the Circuit Court for Newport News, and shall not be transferred to any other state or venue. 9. That any photographs, pictures, slides and/or movies of me taken or made by the Released Parties in connection with my attendance at, preparation for and/or participation in the Event, or any

Signature (Parent or Guardian if under age 18)

Date

Please make checks payable to Flat-Out Events with memo CFA 5K. All payments must be received at time of registration

Please