

Ozark Fitness Challenge - Registration Form

Name _____ Gender _____ Age on 4-14-2012 _____
 Address _____ City _____ State _____
(Pre-event correspondence will be sent to this email unless otherwise requested)
 Email _____ Landline _____
 Cell phone _____ Race day emergency contact _____ Phone _____

T-shirt size: (circle one): S M L XL XXL
 (T-shirts will be included for the 10k, half-marathon and 100k events only)

I will be participating in the following events	Self-Sponsored Entry Fee
5K (Saturday) fun run/walk (certificate of completion provided)	\$15
10K (Saturday)	\$25
10 K Relay (Sat) - Team Event, Team name if Applicable: _____	\$60
Half marathon (Saturday)	\$45
100 K (Sat and Sun)	\$75

Payment:

I am paying by check. Make checks payable to: "Ozark Fitness Challenge"
 I have paid via PAYPAL on the link at harrison100k.org. Confirmation number _____
 I am paying by credit card: Circle one: MC Visa Discover

Credit Card # _____ - _____ - _____ Exp. Date _____ **T-Shirt Sz**

If registering a team, list the 3 fellow team members below:

Name	Phone #	Age on 4/14/2012	S, M, L, XL, XXL	Gender
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Please read and sign the following waiver. Your registration will not be accepted without it.

WAIVER & RELEASE FROM LIABILITY

Participation in the Ozark Fitness Challenge can be a potentially hazardous activity. I know that running/walking in a road race can be a serious threat to the health of individuals who are not in good physical condition. I should not enter unless I am medically able and properly trained. I also know that, even though police protection will be provided, there may be traffic or other hazards on the course. I expressly assume any and all risks associated with participation in this event including, but not limited to, falls, traffic, contact with other participants, the effects of weather and the condition of the roads. Knowing these facts, and in consideration of your acceptance of my entry fee, I myself, my executors, administrators, heirs, assignees, or anyone else who might have claim on my behalf, do hereby release and discharge the City of Harrison, Harrison Police Department, Boone County Police Department, ArkansasRunner.com, THE OZARK FITNESS CHALLENGE (OFC) RACE ORGANIZATION, and all sponsors, agencies, subsidiaries, affiliates and beneficiaries jointly and severally and hold and waive harmless from and against any and all actions, claims, injuries, demands, liabilities, loss, damage or expenses of whatever kind and nature, including but not limited to attorney fees, which at any time may be incurred by reason of my participation in or my preparation for any of the afore said events. I attest and verify that I have full knowledge of the risks involved in this event, and I am physically fit and sufficiently trained to participate.

I agree that the OFC RACE officials have the right to remove me from the race if they are of the opinion it is in my best interest or the best interest of others. I further grant permission to this race, or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any purpose. I have read the foregoing and certify my agreement by my signature below.

Signature _____ **Date** _____

Team members (if team) : 1 _____ 2 _____
 3 _____