

MERRYMOUNT ASSOCIATION FREEDOM FUN RUN



July 3rd, 6:00PM

Merrymount Beach

Number pick-up and day-of registration begins at 5:30PM

Name: _____

Age: _____

Adult: Male ___ Female ___

Child(ren): Male ___ Female ___

Address: _____

**Please Return Completed Form to Laura Lebo,
52 Highfield Road.**

Participant Waiver for Race Registration

I know that running a road race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running 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, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Merrymount Association and all event sponsors and volunteers, 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 grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature: _____

Date: _____

(Parent or guardian must sign if participant is under 18 years old)