

Re*Imagine Christmas Winter Festival Presents:

Stocking Stuffer 5K – Saturday, December 8, 2018 – 1:00pm

Coney Island Park, Lake & Jefferson St's, Medical Lake

Register and pay online at <http://medicallake.org/5k>

Mail-In Registration and check to: ML5K, PO Box 344, Medical Lake, WA 99022

Contact: Amanda Berquist (509) 979-0158 – ironmanda121@yahoo.com

Pets Welcome! Kids & Pets free with foodbank donation



Description: 3rd Annual Re*Imagine Christmas Winter Festival & Stocking Stuffer 5k Fun Run/Walk (pets welcome). Begin at Coney Island Park and walk/run the beautiful Medical Lake Trail.

Registration Opens at Noon.

*First Name:	*Last Name:	*Age on Race Day:	*M/F
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
*Address: _____		*City: _____	*State: _____ *Zip Code: _____
*Phone: _____	*Email Address: _____ <i>please print clearly</i>		

*Individual Entry Fee: \$ 10.00 (\$15 day of race) **Kids & Pets free with food bank donation**

* **Release, Hold Harmless and Agreement not to Sue:** I fully understand that my/my child's participation in the Stocking Stuffer 5K (hereinafter "event") exposes me/my child to the risk of personnel injury, death or damage to or loss of personal property. I hereby acknowledge that I am voluntarily participating/allowing my child to participate in this event and agree to assume any and all such risk. Children under the age of 16 will be required to have a parent/guardian escort during the entirety of the event and the parent/guardian assumes all associated risk.

I hereby release, discharge and agree not to sue the City of Medical Lake, Winter Festival Committee, Re*Imagine Medical Lake, and/or any organization associated with the event for any injury, death or damage to or loss of personal property arising out of, or in connection with my participation in the event from whatever cause, including the active or passive negligence of the 5K organizers, partners, and volunteers. In consideration for me and/or my child being permitted to participate in the event, I hereby agree, for myself and/or my child, my and my child's heirs, administrators, executors and assigns that I shall indemnify and hold harmless the City of Medical Lake, Winter Festival Committee, Re*Imagine Medical Lake, and/or any organization associated with the event, and all other participating organizations from any and all claims, demands, actions or suits arising out of or in connection with my participation in the event. I have carefully read this release, hold harmless and agreement not to sue and fully understand its contents. I am aware that it is a full release of all liability and sign of my own free will. I agree that pictures and images taken during the event may be used for future promotional purposes.

*Participant's Signature: _____

Parent/Guardian Signature: _____

*Signed at _____, on _____ day of _____ 2018.

*Required Fields