21st Annual Thanksgiving 5K Race & Prediction 5k Run/Walk

To Benefit Special Olympics of St. Mary's County
Saturday, November 18, 2017 – 9:00am
Visitor's Center, St. Mary's City, MD

Win a Turkey!
Door Prize
Raffles!
Baked Goods!

Events: A timed 5K race, a Prediction 5K, or a 1.5 mile Fun Walk.

Rules: Prediction 5K participants must predict finish time and are not allowed to wear watches.

Walkers are invited to participate in either 5k event and will be scored with the runners. Well behaved **dogs** allowed on leashes.

5K Race Awards: Overall top male and female (Award plus a turkey) & top three male and female in the following age categories: 9-under, 10-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

Prediction 5K Awards: Top 5 overall that finish closest to their predicted time. Award + turkey to top M & F.

Entry Fees: **Pre-registration:** $20, register online by 11/15. CBRC members and Special Olympics athletes pre-register for $15. **Mail-in entries postmarked by 11/09**.
Race Day: $25. $20 for CBRC & Special Olympics. Entry fees are tax deductible.

Race Day Registration: 7:45 – 8:45am

Register Early: First 100 paid entrants guaranteed a **Long Sleeve T-shirt.**
Race info: www.cbrcmd.org, 240-577-2692

Register via Active.com **OR mail application to**:
Suzanne Edgar (Turkey 5k)
22235 Bull Road, Leonardtown, MD 20650 (mail by 11/09!)

5K Race / Prediction 5K

Saturday, 11/18/2017 @ 9am. Entry Fee: $20 (pre-registered by 11/15), $15 for pre-registered CBRC members & Special Olympics athletes/parent. Race day $25, CBRC & Special Olympics $20. Checks payable to Special Olympics St. Mary's County.

Name _____ (Last / First) **5K Race Prediction Fun Run 5K Walk** *Please circle one*

Address _____

City _____ State _____ Zip _____

DOB ___-___-___ Age on 11/19 ___ Gender **M F** **T-Shirt Size: XS, S, M, L, XL, XXL, or NONE**

Telephone Number: _____

Email: _____

Race Official Use Only: Number: _____ Predicted Time: _____

Liability waiver must be signed

In consideration of participating in the Special Olympics Maryland Thanksgiving 5K or Prediction 5K Race/Walk ("Activity"), I represent that I understand the nature of running events and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I and/or my minor child believe event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Activity.

I fully understand that running events involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I and/or my minor child incur as a result of my and/or my minor child's participation in the Activity.

I hereby release, discharge, and covenant not to sue Special Olympics, Inc., Special Olympics Maryland, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

_____ _____
Printed Name of Participant — Signature of Participant (only if age 18 or over)

_____ _____
Date — Signature of Parent/Legal Guardian (if participant under age 18)

I give my permission for photographs taken at the event in which my image or the image of any of my minor children appears, to be used for promotional and/or advertising purposes by Special Olympics Maryland, Inc., their media partners or "Releasees" included above without compensation to me or my minor children.

_____ _____
Printed Name of Participant — Signature of Adult Participant OR Signature of Parent/Legal Guardian (if participant under age 18)

_____
Date