

The Biology Club at Bridgewater State University along with the Center for Sustainability and Office of Undergraduate Research present the 5th annual:



5k Trail Mix

Walk/Run for Sustainability

Date: Friday April 22nd, 5:00 PM Sharp Rain or Shine

Location: BSU's Great Hill Trails (Meet in the rear of Tower Lot)

Entry Fee: \$10.00 in advance / \$12.00 day of event/ Sponsorship \$10 minimum

Questions: m2koch@student.bridgew.edu

Name (Last, First): _____

Mailing Address: _____

City/Town, State: _____ ZIP: _____

Telephone Number: _____

Circle: 5k Run / Walk

Email Address: _____

T-shirt size: _____

____ Check here if you do NOT want to be notified regarding the 2012 5k Trail Mix

1. I understand and acknowledge that this activity is potentially hazardous and I agree that my participation is entirely voluntary. I know I should not enter this activity unless I am medically able to participate and by signature below attest that I am medically fit to participate. I understand that by entering in the 2011 5k Trail Mix event (hereinafter referred to as "Event") I will be subject to hazardous that include, but are not limited to: rigorous exercise and exertion; falling; collision with other participants; collision with motor vehicles; and any other perils associated with the event.
2. In consideration of my participating in this program, I agree, on behalf of myself, my assigns, executors and heirs, to release and hold harmless the Curators of Bridgewater State University (hereinafter referred to as "University"), and their trustees, officers, employees, Biology Club members, Event organizers, and volunteer workers, students, and agents from any all liability, damage, or claim whatsoever arising out of my participation.
3. I understand that the University does not provide accident or medical insurance relative to the event.
4. I have read and understand the terms of this Release and agree to all terms and conditions.
5. I hereby consent to any publicity, including the use of my name and likeness, in connection with my participation in this Event at the University.
6. I am of lawful age and legally competent to sign this waiver and Release form, or if less then the legal age of (18) years, my parent or legal guardian's consent and signature is also required and I (we) have signed this document as my (our) own free act.

Participant (or Guardian) Signature: _____

Printed Name: _____ Date: _____

Entry forms may be returned to: **Tracie Fagan, Biology Department, Room 226, Conant Science Building**