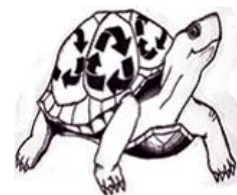


The Biology Club of Bridgewater State University along with the Office of Undergraduate Research presents the 7<sup>th</sup> Annual  
**Trail Mix 5k In Memory of Erik Croll**  
All Proceeds Donated to Water for Cambodia



Date & Time: Thursday, May 2<sup>nd</sup> 2013 at 5:00PM

Location: BSU trails, located behind tower lot

Volunteer: Please convene at rear of tower lot at 3:30PM on the day of the event

Entry Fee: \$10.00 in advance or \$12.00 the day of the event

Questions: [J1Medina@student.bridgew.edu](mailto:J1Medina@student.bridgew.edu) or [LMacdougall@student.bridgew.edu](mailto:LMacdougall@student.bridgew.edu)

**Name (Last, First):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/Town, State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**T-Shirt Size:** \_\_\_\_\_

**Circle:** 5K Run/Walk

Check here if you DO NOT want to be notified regarding the 2014 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 2013 5K Trail Mix event (hereinafter referred to as "Event") I will be subject to the potential hazards, including but not limited to: rigorous exercise and exertion; falling; collision with other participants; collision with motor vehicles; any other possible perils associated with the Event.
2. In consideration of my participating in this event, 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, volunteer workers, students, and agents from any and 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. 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.
5. I am of lawful age and legally competent to sign this waiver and Release form, or if less than 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, Conant Science Building room 301 or contact Dr. Jenna Mendell at [Jennifer.Mendell@bridgew.edu](mailto:Jennifer.Mendell@bridgew.edu) for an online form.

Entrance fee may also be paid via paypal at [cleonae@verizon.net](mailto:cleonae@verizon.net).