



BIB#

AGE GROUP:

14th Annual Karner Blue Kids Race

Saturday – June 30, 2018

Kids Race 9:00 a.m.

CHILD'S NAME _____

PARENT'S NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

AGE ON THE DAY OF RACE: _____ DATE OF BIRTH: _____

Age Categories: Age groups may vary depending on how many participate. All kids **10 & Under** will receive participation ribbons.

WAIVER

I am entering my child in this event with full knowledge that he/she could be hurt. I state that my child is in proper physical condition and there is no medical reason that my child should not participate in this event. I fully assume all risks of injury, illness or death, and release covenant not to sue, and discharge the Black River Area Chamber of Commerce, all volunteers, the city of Black River Falls, WI, the County of Jackson and USATF (USA Track & Field) all actions, claims or demands for damages arising out of my child's participation in this event. The forgoing release is binding upon me personally as a parent, as well upon my heirs, executors, and administrators, and all members of my family, or anyone else who might make claim. Furthermore, I hereby grant full permission to use my child's name and photograph, videotapes, or other record of this event for the Black River Area Chamber of Commerce's promotional purposes.

Parental Signature _____ DATE _____