

KIDS ON TRACK



2019

Youth Walking, Running and Wellness Program

Fall Program: Every Sunday, Sept. 8 thru October 27, 2019
2:00pm to 3:15pm at Vestal Coal House

First Name _____ Last Name _____

Email: _____ Phone: _____

Sex: M/F: _____ Age: _____ Shirt Size _____

\$10 for entire Program (includes shirt) . Ages 5 to 15

Check payable to Vestal Coal House, PO Box 854, Vestal NY 13851

Program Waiver (Must Sign)

I know a running and walking program is a potentially hazardous activity that could cause injury or death. I should not enter and run if unless I am medically able and properly trained, and by my signature certify that I am medically able to perform this event, am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation for any reason whatsoever. I assume all risks associated with participating in this event, falls, slippery roads, low temperatures, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers/ carriages, roller skates or blades, animals or radio headsets are not allowed in the program and I will abide by this rule. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Vestal Coal House, UHS their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the sponsoring bodies. This release shall be binding on my heirs, administrators, successors, and assignors and those of the sponsoring organizations. By this' release, I fully intend to discharge the said organizations from any and all injuries or losses suffered by me, while participating in and traveling to and from this event.

Parent/Guardian Signature

Date
