

Wichita Running/Walking Program

Please complete information below

1. Participants information

Name: _____

Age: _____

DOB: _____

Male or Female: _____

Address: _____

Postal/Zip Code: _____ City: _____

T-Shirt Size: _____

Telephone: _____

E-mail: _____

2. Rules/guidelines

- You must pre-register with us for each event prior to the deadline date.
- Your attendance is kept for each pre-registered run.
- If you miss 2 runs throughout the year that we paid for, you will forfeit your membership privileges for the running/walking club.

I understand that my participation in the Wichita Running/Walking Program involves physical exercise that may be strenuous at times. I understand and agree that I should be in adequate physical condition or acquire a recommended physician clearance before engaging in this fitness and exercise program.

In the event of illness, injury or accident during my fitness participation as a member, I or my parent/guardian if I am a minor child, hereby, release, hold harmless, discharge and agree not to sue the Wichita and Affiliated Tribes, partner and organizations, their employees or representatives, and owners/leasers of premises from all liabilities or damages brought in litigation by other persons or parties on behalf of participants. This includes, but is not limited to liability of illness, injury or accident, lost stolen or damaged property, or other risks that are not foreseeable, which may occur during my participation. If illness, injury or accident occurs requiring immediate medical attention, I or my parent/guardian, if a minor, authorize sponsoring representatives to obtain necessary medical treatment for my condition.

I have read this form and understand that there are inherent risks associated with any physical activity and recognize it is my responsibility to provide accurate and complete health/medical history information. Furthermore, it is my responsibility to monitor my individual physical performance during any activity.

Date: _____/_____/_____

Signature: _____

Parent/guardian signature: _____