



Caracciolo Classic Registration Form Saturday, June 3, 2017

(One participant per form)

Name _____ Sex _____ Age on Race Day _____

Address _____

City, State Zip _____

Home / Cell _____ E-mail _____

I will run the 5K race

I will do 1 mile Fun Walk

Shirt ONLY

Shirt Size (check one): Youth: S M L Adult: S M L XL XXL

\$25 participant fee includes run/walk registration, eligibility for door prizes and dry fit shirt. \$15 for shirt ONLY.
Please make checks payable to **Adorno Fathers Foundation** or register/pay at website,
<http://www.adornofathersfoundation.org>

Emergency Contact Name _____

Emergency Contact Phone _____

Caracciolo Classic Waiver of Liability (MUST BE SIGNED)

I know that running/volunteering for this event is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained. My signature certifies that I am medically able to perform this event. I 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 in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or roller blades and animals are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and in consideration of my entry acceptance, I, for myself and anyone entitled to act on my behalf, waive and release the Caracciolo Classic, Adorno Father's Foundation, Saint Joseph's High School, and all event sponsors, 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 persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record to his event for any legitimate purpose.

Signature _____ Date _____

Parent or Guardian if under 18 _____