



DON HAND MEMORIAL

CROSS COUNTRY INVITATIONAL



MS/HS XC Meet

Saturday November 11, 2017
Start Time 12:30 pm
Northlake Park

More details communicated through coaches

Make checks payable to LOVELAND ROAD RUNNERS in the amount of \$10.00
Return form to coach

Athlete Name: _____

Age on Race Day: _____ Grade on Race Day: _____

School: _____

Signature: _____

Read and agreed to waiver. Signed by guardian if under 18 year of age





LIABILITY AND PUBLICITY WAIVER:

I understand that by registering electronically, I accept and agree to the waiver and release agreement presented in the online registration and that this document includes a release of liability and waiver of legal rights that deprive me of the right to sue certain parties. By agreeing electronically, I acknowledge that I have read and understand the release agreement presented to me as part of the online registration process I know that running a road race, regardless of the distance, is a potentially hazardous activity. I attest that I have full knowledge of the risks involved in the race, that I assume those risks, that I will assume and pay my own medical and emergency expenses in the event of an accident, illness or other incapacity, regardless

of whether I have authorized such expenses, and that I am physically fit and sufficiently trained to participate in this race. Having read this waiver and knowing these facts, and in consideration of the acceptance of my entry, I hereby release and discharge any and all rights, demands, claims for damages and causes of suit or action, known or unknown, that I may have against Loveland Road Runners and its race directors., the State of Colorado, City of Loveland, Larimer County and event host site and including all race officials, sponsors, volunteers, contract employees, and any other personnel in any way assisting or connected with this event from any and all claims or liability of any kind or nature whatsoever, even though that liability may arise out of negligence or carelessness of the persons or parties named in this waiver. I

hereby grant permission to Loveland Road Runners and its race directors., and its sponsors the use of any photographs, motion pictures, recordings or any record of this event for legitimate purposes. For the safety and consideration of other participants, please follow these guidelines: Yield to faster runners and walkers; No bicycles, roller blades or skateboards on the course; Please don't wear headsets. I understand that there are NO REFUNDS. I further understand and agree that there will be no refund under any circumstances, including but not limited to injury, a scheduling conflict, Acts of God (including fire, flood, earthquake, storm, hurricane or other natural disaster) and/or event cancellation.

UNDERSIGNED HAS CAREFULLY READ THIS WAIVER, UNDERSTANDS ITS CONTENTS AND SIGNS IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. If under 18, a parent or legal guardian signature is required. The undersigned parent or legal guardian acknowledges that he/she is signing this Waiver on behalf of a Minor and that Minor shall be bound by all the terms of this Waiver. If, despite this Agreement, I, or anyone on the Minor's behalf, makes a claim for liability against any of the Releases Parties, I will indemnify, defend and hold harmless each of the Releases Parties from any such Liabilities which may be incurred as the result of such claim.