

LAEL is our Super Hero!

Family Day Registration



Date: Sunday, October 8th from 12 pm-3 pm

Location: Begins and ends at the Granger Community Center, 2200 Walnut St, Granger, IA

Time: Registration begins at noon, Race will begin at 1 pm and the kids events go until 3 pm

\$25 per/person or \$50/family which includes run, lunch, DJ & Kids Carnival

We will also have baked items available for purchase and a silent auction.

Pre-registration received **before 9-24-17** will include a **FREE** t-shirt. SIZE: _____ (youth/adult)
mail Registration/waiver(s) to:

Kendra Ollinger
2300 Park Ave
Granger, IA 50109

*****Checks made payable to: The Thesing Family****

Name: _____

Address: _____ City: _____ State: _____ Zip _____

Email: _____ Phone Number: _____

Prizes will be awarded to Top Male, Top Female & Best Super Hero Costume. All kids will receive a medal.
(If anyone is interested in helping with the run, kitchen or sponsoring an activity; please email klswimmer@hotmail.com)

Please include the signed waiver below for each participant walking/running.

1 mile or 5K run/walk waiver

RELEASE OF LIABILITY (Adult)

Waiver: In consideration of the acceptance of this entry I waive all claims for myself and my heirs against the sponsors, cooperating and coordinating groups and any individuals associated with this event and will hold them harmless for any and all injuries which may result from my participation. I hereby give my permission to the media to use my name and photograph in the newspaper, broadcast, telecast of this event without limitation or obligation. I certify that I am physically fit for this event and understand the risks involved by participating in this event.

Signature _____ Date _____

PARENT / GUARDIAN CONSENT FORM AND LIABILITY WAIVER FOR KIDS UNDER THE AGE OF 18 (if applicable)

Participant name: _____ Birth Date: _____ Sex: _____

Parent/Guardian Name: _____ Home Phone: _____

I, _____, **grant permission for my child**, _____, to participate in the 1 mile or 5K Super Hero Run/Walk. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the volunteers, sponsors, and coordinating group associated with the event, arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection with this event.

Medical Matters: I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child.

Signature _____ Date _____