

Flannagan's Run



Juneau Trail and Road Runners is an affiliate member of the Road Runners Club of America.

Race Date: Start Time: Location: **Race Contact:** Saturday March 17 2012 10:00AM (Registration 09:15AM) **Douglas Fire Hall** Dan Robinson 364-2521 robidanc@gmail.com

join JTRR https://southeastroadrunners.org/ results online: https://jtrr.org/event/2012/race/27

Course Description:

29th annual Flannigans Run! 5 Mile and 1 Mile

<u>Distance</u> □1 Mile (1 miles) □5 Mile (5 miles) □volunteer - \$0	ENTRY FORM SPONSORED BY Juneau Trail and Road Runners		ENTRY FEES Kids 18 & Under - \$1 Adults Day of Race - \$10
Last Name		First Name	·····
GENDER CIRCLE ONE (Male Female Non-Binary)			
email		JTRR MEMBER: (YES NO) (if yes, skip phone,address)	
MAILING ADDRESS			
STREET OR BOX			
СПТҮ		PHONE	
STATE		ZIP	
RELAY TEAM NAME_			
trained, and by my signature, I certify that I am r participation in this event, including the right of all risks associated with running or volunteeri volunteers, race personnel, contract service pro the conditions of the road and/or trail including and I will abide by all race rules. If allowed by I jogger or stroller. Having read this waiver and	medically able to perform this event, am in good any official to deny or suspend my participation g in this event, including but not limited to: fal oviders, employees, and spectators. I assume a surrounding terrain. I understand that bicycles the Race Director, and if I am pushing a baby knowing these facts and inconsideration of you	d héalth, and am properly trained. I agree to for any reason whatsoever. I attest that I he IIs, physical contact with and/or the potenti all risks including: the effects of the weather s, skateboards, roller skates or inline skates /jogger or stroller, I also accept the respo ur accepting my entry I, for myself and anyo	Il not enter and participate unless I am medically able and properly o abide by any decision of a race official relative to any aspect of my ave read the rules of the race and agree to abide by them. I assume al contraction of a communicable disease from other participants, r; high heat and/or humidity, freezing cold temperatures; traffic and s, animals, and personal music players are not allowed in the race, onsibility for injury up to death of the child being transported in the one entitled to act on my behalf, waive and release the Juneau Trail s Club of America, 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. In addition, I acknowledge the contagious nature of communicable diseases and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or anyother record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is canceled before or during the event

SIGNATURE

BIB NUMBER: (for race officials only)

SIGNATURE of parent or guardian if under 18 DATE