Seacoast Relay

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

Race Date:	Saturday May 26 2001
Start Time:	09:00AM (Registration 08:15AM)
Location:	Mendenhall River Elementary School
Race Contact:	Sue Scott

join JTRR https://southeastroadrunners.org/

results online: https://jtrr.org/event/2001/race/588

Course Description:

10th Annual Sea Coast Relay CONTACTS: Sue Scott (907) 789-9190 e-mail: gregorys@gci.net or Eric Carver (907) 364-3306 e-mail: carver@gci.net Note the race start and new finish in 2001! Two start times also! Organize a team of 5 persons, or test your mettle with a team of only 2 persons. The race finishes at TBA where food and dance music awaits you. 21.93 miles from Mendenhall River Elementary School to the Eagle Beach picnic area.

ENTRY FORM

Distance

☐ **volunteer - $0**

ENTRY FEES

Kids 18 & Under - $0

Adults Day of Race - $0

SPONSORED BY

Juneau Trail and Road Runners

Last Name _____ First Name _____

GENDER CIRCLE ONE (Male|Female|Non-Binary) Age on 7/1/2001_____

email _____ JTRR MEMBER: (YES|NO) (if yes, skip phone,address)

MAILING ADDRESS

STREET OR BOX _____

CITY _____ PHONE _____

STATE _____ ZIP _____

RELAY TEAM NAME_____

WAIVER: I know that running or volunteering to work in this race 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, and by my signature, I certify that I am medically able to perform this event, am in good health, and 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 attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running or volunteering in this event, including but not limited to: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, volunteers, race personnel, contract service providers, employees, and spectators. I assume all risks including: the effects of the weather; high heat and/or humidity; freezing cold temperatures; traffic and the conditions of the road and/or trail including surrounding terrain. I understand that bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a baby jogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the jogger or stroller. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail and Road Runners, the United States Forest Service, the state of Alaska, the City and Borough of Juneau, and the Road Runners 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_____