

Beat the Odds Women's Race Against Cancer



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

Race Date:	Saturday September 01 2007
Start Time:	09:00AM (Registration 08:15AM)
Location:	Mendenhall River School
Race Contact:	DefaultRaceDirector Unassigned
1	none
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/event/2007/race/331
Course Description:	
2-mile walk or 5K run, Start @ 9 a.m. Mendenha	II River School. Info: www.cancerconnectionak.org
Distance ENTR	RY FORM ENTRY FEES
□ sk (5 kiii) □ volunteer - \$0	Kids 18 & Under - \$0
SPOR	NSORED BY Adults Day of Race - \$0
	and Road Runners
Last Name	First Name
GENDER CIRCLE ONE (Male Female Non-Binar	y) Age on 7/1/2007
email	JTRR MEMBER: (YES NO) (if yes, skip phone,address)
MAILING ADDRESS	
STREET OR BOX	
СПҮ	PHONE
STATE	ZIP
WAIVER: I know that running or volunteering to work in this race is a potentially haza trained, and by my signature, I certify that I am medically able to perform this event, a participation in this event, including the right of any official to deny or suspend my parall risks associated with running or volunteering in this event, including but not limi volunteers, race personnel, contract service providers, employees, and spectators. I the conditions of the road and/or trail including surrounding terrain. I understand the and I will abide by all race rules. If allowed by the Race Director, and if I am pushir jogger or stroller. Having read this waiver and knowing these facts and inconsideral and Road Runners, the United States Forest Service, the state of Alaska, the Ci successors from all claims or liabilities of any kind arising out of my participation in this waiver. In addition, I acknowledge the contagious nature of communicable diseathis event. I acknowledge that such exposure or infection may result in personal inju	ardous activity which could cause injury or death. I will not enter and participate unless I am medically able and properly min good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my ricipation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume tied to: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, assume all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and at bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, ng a baby jogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the tion of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail ity and Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in sees and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in ry illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion derstand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent
CICNATURE	BIB NUMBER:
SIGNATURE	(for race officials only)
SIGNATURE of parent or quardian if	under 18 DATE
SIGNATORE OF PAIGHT OF GUARDIAN II	