

Race Date: Start Time:

McDowell Group Governor's Cup 5k and 1 Mile



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

Saturday July 14 2012

09:00AM (Registration 08:15AM)

Location:	Dimond Courthou	se
Race Contact:	Jim Grammel	
	586-2991	
	jimg@mcdowellgi	roup.net
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/event/2012/race/21	
Course Description:		
5K Race: 9:00 AM, Dimond Courthouse, 4th and Main Bone & Joint Center) CONTACT: Jim Grammel, 586-2		
Bolle & John Center) CONTACT. Jim Grammer, 300-2	.991, Jimg@mcdoweligit	ουμ.ποι
Distance □5k (5 km) ENTRY	FORM	ENTRY FEES
□1 mile (1 miles)		Kids 18 & Under - \$1
□volunteer - \$0 SPONSO	RED BY	Adults Day of Race - \$10
Juneau Trail and	l Road Runners	
Last Name	_ First Name	
GENDER CIRCLE ONE (Male Female Non-Binary)		
email	JTRR MEMBER: (Y	'ES NO) (if yes, skip phone,address)
MAILING ADDRESS		
STREET OR BOX		
СПҮ		
STATE	ZIP	
WAIVER: I know that running or volunteering to work in this race is a potentially hazardous as trained, and by my signature, I certify that I am medically able to perform this event, am in goo participation in this event, including the right of any official to deny or suspend my participatio all risks associated with running or volunteering in this event, including but not limited to: for volunteers, race personnel, contract service providers, employees, and spectators. I assume the conditions of the road and/or trail including surrounding terrain. I understand that bicycle and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a bab jogger or stroller. Having read this waiver and knowing these facts and inconsideration of yo and Road Runners, the United States Forest Service, the state of Alaska, the City and E successors from all claims or liabilities of any kind arising out of my participation in this event his waiver. In addition, I acknowledge the contagious nature of communicable diseases and this event. I acknowledge that such exposure or infection may result in personal injury illness pictures, recordings or anyother record of this event for any legitimate purposes. I understand that I am not entitled to a refund if the event is canceled before or during the event	od health, and am properly trained. I agree on for any reason whatsoever. I attest that I alls, physical contact with and/or the pote all risks including: the effects of the weathes, skatehoards, roller skates or inline ska by jogger or stroller, I also accept the resour accepting my entry I, for myself and ar Borough of Juneau, and the Road Runnent, even though that liability may arise ou divoluntarily assume the risk that I may be s, permanent disability and/or death. I gra	e to abide by any decision of a race official relative to any aspect of my have read the rules of the race and agree to abide by them. I assume thial contraction of a communicable disease from other participants, ner; high heat and/or humidity, freezing cold temperatures; traffic and tes, animals, and personal music players are not allowed in the race, ponsibility for injury up to death of the child being transported in the though the control of the co
CIONATUDE	BIB NUMBE	
SIGNATURE	(for race officials o	nly)
SIGNATURE of parent or guardian if und	 er 18 DATE	