

SEPTEMBER 16, 2017 RACE REGISTRATION

Please Print · 1 entrant per form · Photocopies accepted

Team Name
MUST BE EXACT!

1. Would you like to be recognized as a breast cancer survivor by receiving a complimentary pink cap and T-shirt? Yes No

2. E-mail

Name Last First

Street Address City

State Zip Daytime Phone () Sizes Youth: S M L Adult: S M L XL XXL

Female Male DOB / / Age on Race Day Course certification #PA08017WB

3. Race Fee: DISCOUNTS APPLY ONLY TO "ONLINE" REGISTRATIONS

To ensure the safety of all race participants Bibs MUST be worn on the front of your t-shirt on race day to participate in the event.

* The first 4,000 registered participants will receive a Race T-Shirt and Race Bib

* Virtual registrants will receive a Race t-shirt

RUNNERS - Includes Timing Chip

- \$ Adults (20-59)* \$30.00
- \$ Survivors \$20.00
- \$ Youth (14-19)** \$25.00
- \$ Enclosed is my personal contribution to the fight against breast cancer
- \$ Total Enclosed

WALKERS

- \$ Adults (20-59)* \$25.00
- \$ Survivors \$15.00
- \$ Youth (14-19)** \$20.00
- \$ Virtual \$20.00
- \$ Enclosed is my personal contribution to the fight against breast cancer
- \$ Total Enclosed:

For Official Use Only
Date Rec'd _____
 Check Cash Other
Initialed By: _____

Overall M/F and Age Group Awards for TIMED RUNNERS ONLY!

* For Adults 60 and older, please use discount code NEPA SENIOR to save \$10.

** If you are 13 or younger please use the discount code NEPAYOUTH to save \$10. You must be 18 You must be 18 years old to register. If you are under age 18, please get a parent or guardian to sign you up.

Race Waiver & Release (Must be signed by participant): **Unsigned entry forms will be rejected.**

I AGREE THAT ANY AND ALL REPRESENTATIONS MADE AND RELEASES, WAIVERS, COVENANTS, CONSENTS AND PERMISSIONS GIVEN BY ME HEREUNDER ARE GIVEN ON BEHALF OF ME AND ANY AND ALL OF MY MINOR CHILDREN OR PERSONS OVER WHOM I HAVE GUARDIANSHIP TRAINING FOR PARTICIPATING IN OR ATTENDING THE EVENT. MINORS UNDER 18 YEARS OF AGE MUST BE ACCOMPANIED BY A PARENT OR GUARDIAN WHO IS ALSO A REGISTERED PARTICIPANT.

Acknowledgement and Waiver of Liability/Assumption of Risk In consideration of participation in the Susan G. Komen Race for the Cure, I, for myself and my next of kin, heirs, administrators and executors, waive and release The Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G. Komen ("Komen"), its affiliates (including, but not limited to, Northeastern Pennsylvania ("Affiliate"), directors, officers, administrators, representatives, past and present employees, volunteers, agents, supervisors, participants, all city and state governments, assigns, vendors, contractors, licensees, their representatives and successors and other persons (collectively, the "Releasees"), from any and all claims, liabilities, actions, demands, expenses, and attorneys' fees arising out of my training for, participation in and/or attendance at this event and my related fundraising activities (collectively, "this event"). I understand that the nature of my activities relating to this event may involve physical activity, contact with unidentified or unfamiliar persons or other potential risk of bodily injury or damage to property and I hereby voluntarily assume full and complete responsibility for, and the risk of, any injury (including death), accident or lost/stolen property which may occur during this event. I attest that I am medically and physically able to participate in this event. If I experience any doubt as to my ability to successfully and safely participate in and/or complete this event, I take full responsibility for consulting a physician. I consent to emergency medical care and transportation in the event of injury to me as medical professionals may deem appropriate. This Release extends to any liability arising out of or in any way connected with the medical treatment and transportation provided in the event of an emergency, including, but not limited to, negligence emergency rescue operations. I agree to observe and obey all laws, rules and safety procedures that relate to this event. I agree to (i) abide by any decision of an event official relative to my ability to safely compete in this event; and (ii) exhibit appropriate behavior at all times. Event officials may dismiss me, without refund, should my behavior endanger the safety of or negatively affect this event or any person, facility, or property. **Image/Recording/Results Release** I give the Releasees the irrevocable, perpetual and worldwide right to use, copy, publicly perform or display, distribute, modify, translate, and create derivative works of, for any purpose whatsoever, wherever, and whenever and without compensation (i) any personal statements, photographs, videotapes, audiotapes, and other recordings of me that are made during the course of this event and any original material created by me in connection with this event; and (ii) the results of my participation in this event. Without limiting the foregoing, I agree that all personal information provided by me in connection with this event may be used by Affiliate in accordance with its privacy policy found at www.komennepa.org

Miscellaneous This Release shall be construed under the laws of Pennsylvania. In the event any provision of this Release is deemed unenforceable by law, (i) Affiliate shall have the right to modify such provision to the extent necessary to be deemed enforceable; and (ii) all other provisions of this Release shall remain in full force and effect. I understand that all donations made in connection with this event are non-refundable and non-transferable, even if I do not participate in this event. I also understand that the registration fee is non-refundable, nontransferable, and not tax deductible. I certify that I am at least 18 years of age. I understand that I have given up substantial rights by accepting this Release, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my acceptance to be a complete and unconditional release of liability to the greatest extent allowed by law.

Unsigned entry forms will be rejected.

X

Signature

Date

Signature of Parent or Guardian (if under 18 yrs.)

Date

Mail along with check to:

Komen NEPA Race for the Cure®
125 N. Washington Avenue, Suite 260
Scranton, PA 18503

Email Inquiries: register@komennepa.org
Phone Inquiries: 1-800-650-2873 (CURE)

Mail-in deadline on or before September 6, 2017

Before mailing your entry form, have you:

- Completed the form in its entirety?
- Signed the bottom of the form?
- Made check payable to Komen NEPA Race for the Cure?