

Fine Print:

I give my consent in consideration for being permitted to participate in the 2010 RUN UNITED 5K ("Event"). I represent and warrant that I am a voluntary participant in this Event, and I am in good physical condition. I know that this Event is strenuous and involves the potential for bodily injury and I hereby assume full and complete responsibility for any injury, loss, or accident which may occur during my participation in this Event or while on the premises of the Event. I hereby release and hold harmless and covenant not to sue Capital Area United Way, Delta Dental of Michigan and its affiliates and subsidiaries, Okemos and Meridian Charter Townships, all other Race Sponsors and their employees and agents, and any other person or entities associated with this Event ("Releasees") from any loss, liability, or claims I may have arising out of my participation in this Event, including but not limited to, personal injury or damage to property suffered by me or any other person whether the same is caused by falls, contact with other participants, conditions of the race course, or negligence of the Releasees, to the fullest extent allowed by law. If I do not follow the rules of this Event, I understand that I may be removed from the competition. I give my full permission to use my photographs, videotapes, audiotapes, or other recording of me that are made during the Event. I understand that this Waiver and Release may be stored electronically and agree that a copy is authentic and admissible as evidence in any future dispute or proceeding.

If signing as a parent or guardian of a minor participant, I certify that I am legally responsible for the participant and agree to adhere to all of the terms of this Waiver and Release, individually and on his/her behalf. I release and agree to indemnify and hold harmless the Releasees from any and all liabilities relative to my minor child's participation in the Event, even if arising from the negligence of the Releasees, to the fullest extent permitted by law.

Participant's PRINTED Name: _____

Participant's Signature: _____

Parent's signature (if under 18): _____

Date: _____

In case of emergency, notify: _____

Relation to you: _____

Emergency contact's phone number: _____



@micauw



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What: 5K run / walk

Where: Delta Dental Complex, 4100 Okemos Rd, Okemos
Sufficient parking is available at Delta Dental in Okemos.

When: 10:00 AM, Saturday, March 6, 2010
5K run and walk start at the same time, runners up front, walkers in back!

Why: to raise money for CAUW's *Unmet Emergency Needs* Fund
The *Unmet Emergency Needs* Fund is designed as a last resort to meet emergency needs for residents of Ingham, Eaton, and Clinton County. The fund will not duplicate current programs or services already being provided in our community.

Packet pickup:

3/4-3/5 at Playmakers in Okemos, MI.
2299 West Grand River Ave
5:30PM-7:30PM

Event parking:

The race will start and finish at the Delta Dental facility at 4100 Okemos Rd, Okemos, MI. Sufficient parking is available at the Delta Dental facility.

Entry Form

(one entrant per form)

Please detach & mail entry form with payment and/or donation to :

Capital Area United Way
c/o RUN UNITED 5K
1111 Michigan Ave., Ste 300
East Lansing, MI 48823

Last Name: _____ **First Name:** _____

Address: _____

City/State/Zip: _____

Phone: _____ **E-mail:** _____

Age (as of March 6, 2010): _____

Please circle the following:

Male OR Female

5K Run OR 5K Walk

Shirt Size:

S M L XL

Race entry fee enclosed:

(includes shirt, while supplies last)

Before 3/1/10 - \$20.00 _____

Before 3/6/10 - \$25.00 _____

Day of race - \$30.00 _____

Registration **IS** available online at:
www.capitalareaunitedway.com/run_united

____ I am unable to run/walk but would like to VOLUNTEER for CAUW.

____ I would like information on becoming a SPONSOR for this event.

I am unable to run/walk, but enclosed is my tax deductible DONATION of \$_____.

PLEASE TURN FORM OVER. ALL PARTICIPANTS MUST COMPLETE THEIR OWN LIABILITY WAIVER.

Want to know more?

Have questions?

Call Brennan - 517.203.5015

or

Pat - 517.203.5022