

5K FUNDRAISER

Help support Cayuga National Honor Society by entering our 5k or 1.5 mile youth run. It's \$25 per person for the adult 5k and 20\$ per person for the youth run. This price includes a shirt. It will be hosted at Cayuga I.S.D. On **May 2nd both runs will start at 8:00 AM. Free water will be provided at the halfway mark. All runners need to be there at 7:30 AM to sign in and receive their shirt! Gate entries are 30\$ and will not receive a shirt. *Pre Register by **April 11th** ***

Gray Shirts



Youth Run: _____ 5k _____ Name: _____ Shirt Size: _____

Phone number: _____ Form of payment: _____

WAIVER: I KNOW THAT RUNNING A ROAD RACE IS A POTENTIALLY HAZARDOUS ACTIVITY. I SHOULD NOT ENTER AND RUN UNLESS I AM MEDICALLY ABLE AND PROPERLY TRAINED. I AGREE TO ABIDE BY ANY DECISION OF A RACE OFFICIAL RELATIVE TO MY ABILITY TO SAFELY COMPLETE THE RUN. ASSUME ALL RISKS ASSOCIATED WITH RUNNING IN THIS EVENT INCLUDING, BUT NOT LIMITED TO: FALLS, CONTACT WITH OTHER PARTICIPANTS, THE EFFECTS OF THE WEATHER, TRAFFIC AND CONDITIONS OF THE ROAD, ALL SUCH RISKS BEING KNOWN AND APPRECIATED BY ME. HAVING READ THIS WAIVER AND KNOWING THESE FACTS AND IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, I FOR MYSELF AND ANYONE ENTITLED TO ACT ON MY BEHALF, WAIVE AND RELEASE CAYUGA ISD, ALL COACHES AND PLAYERS ASSOCIATED WITH CAYUGA ISD, AND ALL 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 THE WAIVER. I CONSENT THAT I AM 18 YEARS OR OLDER OR A PARENT /GUARDIAN OF THE PARTICIPANT AND GRANTING PERMISSION FOR HIM/HER 5K PARTICIPATION.

Participant Signature _____ Parent/Guardian (If not an adult) _____
Date _____

**For Questions please contact Graci Satterwhite at 903-292-9363
venmo- CayugaISD (please place your name and NHS 5k in the description)**