

Waiver and Registration Form - One Person Per Form

The attached waiver must be completed, signed and returned with Registration Form.



IMPORTANT: Each entrant must read and sign the Waiver and Indemnification Agreement below and send it with the completed registration attached.

In consideration of being permitted to participate in the BlueCross Riverbend Run & Walk, I, the undersigned, expressly assume all risk and injury or loss of life to myself and loss of or damage to property arising out of or in any way connected with my participation in the BlueCross Riverbend Run & Walk, and I hereby release Friends of the Festival, Inc., BlueCross BlueShield of Tennessee, Event Technical Services and the Chattanooga Track Club, its affiliated clubs, the State of Tennessee or any of its agencies, and their respective agents, employees, representatives, volunteers, successors, and signees from any claims, demands, actions and judgments arising out of my participation in the BlueCross Riverbend Run & Walk. To the best of my knowledge, I have no physical restrictions which would prohibit my competing in the BlueCross Riverbend Run & Walk. I understand it would be in my best interest to consult my physician prior to my participation in the BlueCross Riverbend Run & Walk. I grant permission to have emergency medical personnel attend to me during my participation in the BlueCross Riverbend Run & Walk if it is deemed necessary or appropriate. I, the undersigned, grant the BlueCross Riverbend Run & Walk sponsors, contractors and representatives the non-exclusive, perpetual and worldwide rights to record, by video tape, photograph or otherwise, in whole or in part, my name, voice, commentary, image, likeness, movements and biographical data, and to use the same, individually or in conjunction with others, for commercial or non-commercial purposes, in any manner, for any purpose without compensation. I, the undersigned, certify that I am at least 18 years of age.

Please print or type:

Entrant's Name _____

Address _____ Apt. # _____

City _____ State _____ Zip Code _____

Telephone # _____ Emergency Contact Telephone # _____

E-mail _____ Date of Birth _____

Age on Race Day Male Female

10K* 5K* 5K Wheelchair*

5K Walk 1-Mile Fun Run & Walk

T-shirt Size:

Adult: S M L XL XXL

Child: 2T S M L

Entry Fee:

Received by:	<u>June 2</u>	<u>June 3 – 12</u>	<u>June 13</u>	
Seniors (60+)	\$8	\$12	\$18	\$ _____
Adults	\$14	\$18	\$24	\$ _____
Children (under 12)	\$8	\$12	\$18	\$ _____
BlueCross employee - deduct \$5 and enter Employee ID Number: _____				-\$ _____

Riverbend Festival pins \$23 each (limit 4) on/before June 4 (while supplies last)

Refer to Packet Pickup qty _____ x \$23 \$ _____
Total: \$ _____

Register online at riverbendfestival.com on or before June 10.

Make check payable and send to: **Friends of the Festival**
180 Hamm Road
Chattanooga, TN 37405

*Timed with IPICO Sportag™ Timing System

No Refunds

BlueCross Riverbend Run & Walk is sponsored by:



of Tennessee
plans for better health. plans for a better life.™

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association
This document has been classified as public information.

Participant's Name _____

Signature _____

Date _____

Entrants under 18 years of age must have this agreement signed by their custodial parent or guardian. I certify that I am the custodial parent or guardian of the below-named participant, and I agree to the terms of this Waiver and Indemnification Agreement.

Participant's Name _____

Name of Custodial Parent or Guardian _____

Signature of Custodial Parent or Guardian _____

Date _____