

**We cordially invite you to participate in
Banner PTA's
1st Annual Family Fun Run!**

We are so excited to have a Family wide event at Banner.

We will take registrations for all participants starting Aug. 22, 2019 – Sept. 14, 2019. All Participants registered by Aug. 29th are guaranteed an Event T-Shirt. Any registrations received after Aug. 29 will receive a shirt until we run out.

Check In starts at 7:30 am and The event will kick off at 8:00 am on Sept. 14, 2019 in the Banner School Parking Lot. The 5K Run/Walk will start at promptly at 8:30 am. We will have Jensen Road south of the school blocked off during the event. Banner PTA will provide a Pancake Breakfast following the Event. All participants will receive a complimentary Breakfast with Registration. We invite all family and friends to join us for breakfast for only \$5.00.

We want to Thank all our students, parents, family, and community for your support of Banner PTA. Your continued support allows us to host events, provide playground equipment, educational toys, awards, incentives, and field trips for our Banner students.

Banner Family Fun Run

September 14, 2019 at Banner School

Registration Form

Participants Full Name _____

Grade _____ (If Student Participant provide Grade)

Contact Phone Number _____

Shirt Size: YS YM YL YXL AS AM AL AXL AXXL

(Please circle shirt size)

\$15.00 Individual – Pre-Register until Aug. 29

\$75.00 Family (up to 7) – Pre-Register until Aug. 29

(Please complete a Registration form for all participants)

**** Anyone registered after Aug. 29 will not be guaranteed ****

Event Shirt. They will be provided on a first come first serve basis after Aug. 29th.

Amount included \$ _____

Please make checks payable to Banner PTA



SHOW YOUR SPIRIT! *PLEDGE FORM*

Pledges for: _____

Grade: _____ Teacher: _____

On Saturday September 14, 2019 I will be participating in the Banner PTA Family Fun Run.
 I will have 60 minutes to complete the Fun Run course set up at our school.
 The funds collected will go to Banner PTA to help pay for field trips, assemblies and much more.
I hope you can help by sponsoring me.

Please make checks payable to Banner PTA.

Sponsor Name	Phone Number		Donation	Total Amount

This pledge form DOES need to be returned to school.

ACCIDENT WAIVER AND RELEASE OF LIABILITY (AWRL)

Self/Parent/Guardian _____ Date _____
Address _____

Street _____ City _____ State _____ Zip Code _____

Home Phone () _____ Emergency Phone () _____

Physician Name _____ Phone _____

Participant(s) _____ Age _____

Participant(s) _____ Age _____

Participant(s) _____ Age _____

Participant(s) _____ Age _____

Participant(s) _____ Age _____

EVENT & DATE: Fun Run September 14, 2019

I acknowledge that this event may be an extreme test of a person's physical and mental limits and carries with it the potential for death or serious injury. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of equipment, vehicle traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event, and lack of hydration. I hereby assume all of the risks of participating in this event. I certify that I am physically fit, have sufficiently trained for participation in this event, and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by Banner PTA and the event holders, sponsors and organizers, in the event(s) in which I may participate and that it will govern my actions and responsibilities at said event(s).

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) I Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me due to my participation in this event, **THE FOLLOWING ENTITIES OR PERSONS:** Salem City and its directors, officers, employees, volunteers, representatives and agents, the event holders, event sponsors, event directors, event volunteers; (B) I Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident or illness during this event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by Salem City, the event holders, producers, sponsors, organizers, and/or assigns.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

IF UNDER 18 – PARENT/GUARDIAN WAIVER FOR MINORS

The undersigned parent and natural guardian or legal guardian does thereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of both the minor and the parents or legal guardian.

AUTHORIZATION FOR MEDICAL TREATMENT

This release will authorize Banner PTA to call for medical treatment in the event of an accident or illness while participating in the recreation program of Banner PTA. I understand that these services are provided on a fee basis.

THIS WAIVER PERTAINS TO THE Fun Run on 9/14/19. I HAVE CAREFULLY READ THE ABOVE STATEMENT.

Self/Parent/Guardian (Print) _____

Signature _____ Date _____