Western Albemarle High School
James Sun Memorial Color Run

****WARNING: The Color is made out of Corn Starch****

First Name _____ Last Name _____

Gender: Female | Male DOB (dd / mm / yyyy) _____/_____/_____

Email address _____Phone
_____

Age on Race Day: _____

Entry Fee: $15 or $20 (T-Shirt included)

Send check made out to Western Albemarle High School or bring it into the front office to register.

If applicable:
T-Shirt Size (please circle) XS | S | M | L | XL | XXL

Children 5 and Under running with you (name and age):

Name _____AGE _____

Name _____AGE _____

Name _____AGE _____

Emergency Contact:

Name: _____

Phone: _____

Waiver: I know that running a color run is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by all decisions of the race officials relative to my ability to compete in the race safely. I assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of weather, including high heat and humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, knowing these facts, and in consideration of organizers, and sponsors, Western Albemarle High School and Western Albemarle Rescue Squad from all claims or liabilities of any kind arising out of my participation of this event.

If under 18 this liability form needs to be sign by a Legal Guardian:

Signature:_____ Date:_____