

River Cities Festival 5K

Registration Form

First Name: _____

Last Name: _____

Email: _____

Pre-Registration: \$10 **Shirt Size: _____**

Race Day Registration: \$15

Gender: M/F (please circle)

Age on race day: _____

Age Division: (please check one)

- 17 & younger
- 18 - 35
- 36 - 50
- 51 - 65
- 66 & older

Race Day Schedule:

- 6:00 a.m. - 6:30 a.m.: Registration
- 6:30 a.m. - 6:55 a.m.: Warm up
- 7:00 a.m.: Race starts

I, _____, do hereby:

- 1) Assume all risk of possible damage or injury through the use of facility
- 2) Agree to compensate the City of Miami Springs for any repair and/or replacement costs for damages to the facility or equipment as a result of my misuse of equipment.
- 3) Agree to indemnify and hold harmless the City of Miami Springs and/ or its departments, agents or employees from any liability arising out of my participation in the Springs River Festival 5K.

Signature: _____

Date: _____

Staff Use ONLY

Amount Paid: _____

Cash or Check: **CK#:** _____



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