5K Run/Walk Olean YMCA Saturday April 27, 2013

Sponsored by the Early Identification & **Recognition Program** of Cattaraugus County

Last Name	First Name			•
Mailing Address		City	State	Zip Cod
Phone number	Date of Birth	Age on Race Day	Gender	
Entry Category/Fee				
□ Runner 5K (\$20]	per runner)			

\$30 per person for registering on day of race

Please make your check or money order payable to: Cattaraugus County



Waiver and Release of Claims

I understand that my consent to these provisions is given consideration for being permitted to participate in this Event. I further understand that I may be removed from completion of this competition of I do not follow all the rules of this Event. I am a voluntary participant in this Event, and in good physical condition. I KNOW THAT THIS EVENT IS A POTENTIALLY HAZARDOUS ACTIVITY AND I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT THAT MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT. I, FOR MYSELF, MY NEXT OF KIN, MY MINOR CHILDREN THAT ATTEND THIS EVENT, MY HEIRS, ADMINISTRATORS, AND EXECUTORS, HEREBY RELEASE AND HOLD HARLMESS AND COVENANT NOT TO FILE SUIT AGAINST THE CATTARAUGUS COUNTY DEPARTMENT OF COMMUNITY SERVICES. THE OLEAN YMCA, THEIR AFFILIATES AND ANY AFFILIATED INDIVIDUALS, ANY EVENT SPONSORS AND THEIR AGENTS AND EMPLOY-EES. AND ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT (COLLECTIVELY, THE RELEASEES) FOR ANY INIURY OR DAMAGES I MIGHT SUFFER IN CONNECTION WITH MY PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT. THIS RELEASE APPLIES TO ANY AND ALL LOSS, LIABILITY OR CLAIMS I MAY HAVE ARISING OUT OF MY PARTICIPATION IN THIS EVENT, INCLUDING, BUT NOT LIMITED TO PERSONAL INJURY OR DAMAGES SUFFERED BY ME OR OTHERS, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY FALLS, CONTACT WITH AND/OR THE ACTIONS OF OTHER PARTICIPANTS, CON-TACT WITH FIXED OR NON-FIXED OBJECTS, CONTACT WITH ANIMALS, CONDITIONS OF THE PREMISES OF THE EVENT, NEGLI-GENCE OF THE RELEASES. RISKS NOT KNOWN TO ME OR NOT REASONABLY FORSEEABLE AT THIS TIME OR OTHERWISE. This Photographic Release and Waiver and Release of Claims (Collectively, the "Release") shall be construed under the laws of the state in which the Event is held. I understand that I have given up my substantial rights by signing this Release, and I have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent allowable by law.



Cattaraugus County Attn: Meghan Monahan 1 Leo Moss Drive **Suit 4308 Olean, NY 14760**



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