

# SANGER PARKS & RECREATION DEPARTMENT

## SUSD Blossom Trail Run Competition

### Saturday, March 1, 2008

**The school with the most runners wins!!!**

JUDY Sponsored by:

**CASE 4**  
Fresno County Supervisor District

*This is a free event for SUSD students only*



#### Races:

- 10K Walk (noncompetitive)
- Kids 1/2 Mile (Boys & Girls 10/12)
- Kids 1/4 Mile (Boys 8-9)  
(Girls 8-9)  
(Boys and Girls 6-7)
- Kids 1/8 Mile (Boys and Girls 2-5)
- 10K Run (ages 10 & up)
- 2 Mile Run/Walk (ages 10 & up)

#### Start Times (all Am times)

- 7:30
- 7:40
- 7:50
- 7:55
- 8:00
- 8:05
- 8:15
- 8:20

CHECK- IN for all races between 7:00-7:30 at Bank of America (corner of 7th & "O" streets)

**TURN BOTTOM HALF OF THIS FORM INTO YOUR SCHOOL OFFICE BY FRIDAY, FEBRUARY 15**

First Name _____		Last Name _____		Primary Phone # ( ) _____
Age (on Race Day) _____	Grade _____	D.O.B. (MM/DD/YY) / / _____	M F (circle one)	Alt Phone # ( ) _____
Address _____		City _____	Zip _____	School _____

T-SHIRTS SIZE: (Please circle correct size)

Youth: S M L                      Adult: S M L XL XXL

PLEASE CIRCLE THE EVENT YOUR CHILD WILL PARTICIPATE IN:

10K Walk      Kids 1/2 Mile      Kids 1/4 Mile      Kids 1/8 Mile      2 Mile (run/walk)      10K Run

**WAIVER: MUST BE READ & SIGNED OR FORM WILL BE REJECTED**

In consideration of the foregoing, I for myself, my heirs, executors and administrators, hereby waive and release and agree not to sue the Sanger Recreation Department, its principals the City of Sanger, Pro Race Group, Sanger Chamber of Commerce, Sanger Unified School District, any and all sponsors, organizers, volunteers, contractors, subcontractors or administrators of the event, as well as any officer, director, employee or agent of and of the foregoing with respect to any claims that may arise in connection with my participation in the Blossom Trail Run or any related event, including but not limited to any and all claims of personal injury or property damage. I understand that the Blossom Trail Run is a dangerous activity and I attest that I am physically fit and sufficiently trained to participate. I grant full permission to the race medical officials to authorize emergency treatment on my behalf if they deem it necessary. I grant full permission to any and all of the foregoing to use me name, my voice, and my picture in any broadcast, telecast, advertising, promotion or other account of this event for any purpose whatsoever. I understand that the events will take place rain or shine, and that my entry fee is non-refundable. If I am under 18 years of age, this release and agreement is being signed by my parent or legal guardian on both my and his/her behalf.

By my signature below, I hereby certify and acknowledge that I have read this document and understand each and every paragraph contained in this waiver. I am aware that this is a full release of liability on behalf of the City of Sanger as described above and sign it of my own free will.

11/26/03

Signature (parent/ guardian)

Date