



# 4<sup>th</sup> Annual Trick or Trot 5K Run – 1 Mile Walk Saturday, October 22, 2016

Registration 9:00  
DuBois City Park Amphitheatre

Race begins at 10:00  
@ start of walkway behind Martins

**Registration fees: Before October 19, 2015: \$25**

Please select T-shirt size S M L XL 2XL

*T-shirts guaranteed to everyone that registers by October 6<sup>th</sup>*

**Day of the Race: \$30**

Age 10 and under: Free

Online registration at [RunSignUp.com](http://RunSignUp.com)

Refreshments will be provided for participants following the race. Winners will be announced. Awards presented to male and female with best times in each age category (Age groups: 13 and under, 14-19, 20-29, 30-39, 40+). For those who are participating in the Zombie Chase, awards will be presented to the runner(s) who successfully escape without their flag being captured. Proceeds benefit the DuBois Area Jaycees.

In consideration for being permitted to participate in this event, I, for heirs, my executors, administrators, personal representatives, successors, assigns and myself; I agree to assume all risks arising out of or related to my participation and to release, hold harmless, indemnify, and covenant not to sue DuBois Area Jaycees or City of DuBois, and any and all volunteers and sponsors as well as their affiliated officers, directors, employees, supporters, agents, successors, heirs, and assigns, from all liability to the undersigned, my personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the foregoing named parties or otherwise while the undersigned is participating in the event including pre and post event activities.

I attest and verify that I understand that participating in the event may be potentially hazardous and that I am both physically fit and sufficiently trained for the event; I agree to abide by any decision of any event official or medical personnel related to my ability to complete the event;

I grant full permission to any and all the foregoing to use any photographs, video, motion pictures, digital recordings, or any other record of this event that may contain my image for any legitimate purpose, including commercial advertising without any expectation of demand for any payment or other consideration for such use: and I have read the waiver above and agree to it.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Age: \_\_\_\_\_

Gender: M F

Please circle which event you are participating in: 5K Run 1 Mile Walk

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*If under 18, parent's printed name and signature:

\_\_\_\_\_

\*Please mail all waivers to:

DuBois Jaycees

P.O. Box 23 DuBois, PA 15801

Please make all checks payable to: DuBois Jaycees

Questions? Please e-mail [caitlinthomas4@gmail.com](mailto:caitlinthomas4@gmail.com), [rachelsyktich@yahoo.com](mailto:rachelsyktich@yahoo.com),