

Emergency Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that running or walking in a road race is a potentially dangerous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running or walking in this event, including, but not limited to contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver, I, for myself, my heirs, agents and assigns, and for any child for whom I've signed this form, waive and release the Monessen/Rostraver Rotary Club, its members, and Rotary International, the Zombie Run Walk 5K Committee, the City of Monessen, its officials and employees, the Monessen Volunteer Fire Department, its officers and members, and all race sponsors, supporters and officials, their representatives and successors, from any and all claims of liability of any kind which may arise from my participation in the Zombie 5K Run and Walk, or those of any child for whom I have signed this Registration form.

\_\_\_\_\_  
**Signature (Parent or Guardian if under 18)**

\_\_\_\_\_  
**Date**