



2019

WINTER WELLNESS DASH



**REGISTRATION
NOW OPEN**

**1 MILE
FAMILY WALK/RUN,
CRAZY HAT CONTEST,
AND MORE...**

Where: Upper St. Clair Community & Recreation Center

When: January 12, 2019

Time: Noon

Cost: \$5.00 per person

Children 5 years and under FREE



Register before January 11 to receive a bib # and hat!

Bib # and hat not guaranteed for those registering on January 12

LISA REUTZEL / REUTZEL@TWPUSC.ORG / 412-221-1099 EXT. 619



REGISTRATION FORM

Complete this form and return with the appropriate payment to Community & Recreation Center,
1551 Mayview Road, Upper St. Clair, PA 15241

Please make checks payable to USC Community & Recreation Center.

Questions? Call 412.221.1099 X 619 or X623

Name _____ Date of Birth _____ Female Male

Address _____

E-Mail Address _____ Home Phone _____ Mobile Phone _____

Emergency Contact _____ Emergency Contact Number _____

Will any children under the age of 4 be participating in the event? YES NO

If yes, please complete the following:

Name _____ Date of Birth _____ Female Male

Name _____ Date of Birth _____ Female Male

Name _____ Date of Birth _____ Female Male

NOTE: RELEASE OF CLAIMS

In consideration of the Township of Upper St. Clair granting me or those listed on this form permission to engage in recreational activities within Boyce Mayview Park, the below signed does hereby waive, release, save, and hold harmless and indemnify the Township of Upper St. Clair, its employees, agents, and independent contractors for any and all claims for damage or personal injury to me or loss of property which may be caused by any act or failure to act on the part of the Township of Upper St. Clair, its employees, agents, and independent contractors. To the best of my knowledge, myself or the listed participant is of normal health — having no allergies, physical defects, or illness that would require him/her to abstain from a normal program of physical activity.

Photo Release: By registering for any USC Recreation program, class, or event you are agreeing to allow publication of any photos taken of you and/or your child(ren) at any program, class, event, or facility of the Recreation Department.

Signature _____ Date _____