Johnny Purnell, Race Management,
Personal Trainer, Marathon Coach for Life,
President-Run-A-Way Running Club & purnellracing.com
(Retired US Army SgtMaj)(210) 385-8248

General Registration Form

Race Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fee Included:\_\_\_\_\_\_\_\_

Race Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender:\_\_\_\_\_\_\_\_\_

Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*Please Fill Out Form In Its Entirety \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

WAIVER AND RELEASE OF LIABILITY: I know that running/walking a road race is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I assume all risks associated with running/walking this event including but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, extreme cold, the condition of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry to participate in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I, for myself and anyone entitled to act on my behalf, waive and release Purnell Race Management and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I hereby give my permission to the event organizers and sponsors to use my name and/or picture in any publication, broadcast, telecast or other account of this event without limitation or obligation of further compensation thereof. By signing this waiver and release I certify that I fully understand its significance.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_