



**4th of July
USA
Independence
Day**

FREEDOM RUN - 5k trail run

Fourth of July, 2012, 8:00 a.m. Start

A benefit for the Nevada Union High School track and cross country teams.

Course: Begins at Nevada Union Stadium, through cross country course and back to stadium for finish.

FEE SCHEDULE: (commemorative item only to entries received by 6/28/12)

Runners: \$20 thru June 28th \$25 June 29th – July 4th includes commemorative item

Walkers: \$15 thru June 28th \$20 June 29th – July 4th includes commemorative item

AGE 10 & UNDER: \$15 to June 28th \$20 June 29th – July 4th

*******Race day registration: 7:00 a.m. to 7:45 a.m.*******

Registration Form. ONE ENTRANT PER FORM, PLEASE. Fill out form completely and send with check or money order made payable to: NU Runners Booster Club

MAIL TO: Freedom Run Registration, 12532 Artic Close, Nevada City, 95959

Name: _____ **Phone:** _____

Address: _____

Email: _____ **Sex: M F**

BIRTH DATE: _____ **AGE ON RACE DAY:** _____

AGE GROUP: 10 & under 11-14 15-18 19-29 30-39 40-49 50-59 60-69 70+

PLEASE READ, SIGN & DATE:

I know that running and walking in races are potentially hazardous activities. I should not enter and run or walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to any ability to safely complete the run. I assume all risks associated with running/walking in this race, including, but not limited to, falls, contact with other participants, the effects of the weather, high heat and/or humidity, the conditions of the roads and trails, 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 acceptance of my application for this race, I, for myself and anyone entitled to and on my behalf, waive and release Nevada Union Runners Booster Club and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this race even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I attest that I am physically fit and sufficiently trained for this competition. As part of this waiver, I acknowledge that I have read and understand all of the above.

SIGNATURE: _____ **DATE:** _____

DATE: _____

Parent or Guardian Signature for Participants under 18:

For information: phone (530) 470-9069 or email to ken_newton@comcast.net

www.nurunners.com