

BLUFFTON PARKS DEPARTMENT CHICKS RUN JUST FOR WOMEN 5K

 THURSDAY, JUNE 20 TH AT 7:00 P.M. 
KEHOE PARK IN BLUFFTON, IN

\$20 includes event shirt & after party!

A "Just for Women", "Just for Fun" 5k Fun Run on Bluffton's River Greenway.

Sure we give awards to the fastest overall and age group chicks!

We also award women who inspire us with their enthusiasm, crazy shirts, wild socks, loudest cheers, and more!

So grab your friends, neighbors, co-workers and **RUN** or **WALK** for the pure **LOVE** of a fun night out with your **GIRLFRIENDS**.

FREE GLASS OF WINE AT THE END

(ADDITIONAL GLASSES AVAILABLE FOR PURCHASE)



LOTS OF SNACKS!



DOORPRIZES

PHOTO STOPS

TEAM & INDIVIDUAL AWARDS

SERIES SPONSORS: CAYLOR NICKEL FOUNDATION, FIRST BANK OF BERNE, ADAMS WELLS INTERNET TELECOM TV, INDIANA PHYSICAL THERAPY



Chicks Run Schedule - Kehoe Park, Bluffton

5:30 Event Check In & Race Day Registration Open at Kehoe Park

6:45 Aerobic Warm Up - Kehoe Park Stage

7:00 5K Start at Kehoe Park

7:45 Party / Food & Drinks / DJ

8:15 Awards

Please bring id if you plan to drink wine. 1st glass is FREE, additional glasses are \$4

Make Checks Payable and Return to
Bluffton Parks Department, 128 E Market St. Bluffton, IN 46714
Please Sign Attached Waiver

CHICKS RUN REGISTRATION(PLEASE PRINT)

\$20.00

Name: _____

Email: _____

Address: _____

Phone: _____ Age _____

T-SHIRT SIZE (TANK TOP) select type and circle size

SIZE: Youth Small, Youth Med, S M L XL 2XL

If you are on a team:

TEAM NAME: _____

WAIVER AND RELEASE OF LIABILITY I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and/or property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of athletes, equipment, vehicular traffic, and actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, event monitors, and/or producers of the event. These risks are not only inherent to the athletes, but are also present for volunteers. I hereby assume all of the risks of participating in and/or volunteering at this event. I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person. I acknowledge that this Waiver and Release of Liability form will be used by the event holders, sponsors and organizers of this event and that it will govern my actions and responsibilities in connection with this event. **I HEREBY WAIVE, RELEASE AND DISCHARGE** the City of Bluffton, Indiana, the Mayor of Bluffton, the Common Council of the City of Bluffton, the Bluffton Board of Public Works and Safety, the Department of Parks and Recreation of the City of Bluffton, the members of the Board of Parks and Recreation for the City of Bluffton, the event holders, the event sponsors, Wells County, the Board of Commissioners of Wells County, the Wells County Council, and any agents, successors, assigns or employees of any of the foregoing (hereinafter collectively "the Releasees") from any and all claims or liabilities for death, personal injury, property damage, theft or damages of any kind, whether or not attributable to the negligence of the Releasees, which arise out of or are in any way related to my participation in this event or traveling to and from this event. I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns. I hereby affirm that I am 18 years of age or older, that I have read and understand the foregoing Waiver and Release of Liability and/or have had the opportunity to discuss it with race officials to my satisfaction. I understand that my entry fee into this event is non-refundable. In the unlikely event that it is cancelled due to extreme weather conditions or safety concerns, my entry fee will be used a donation to the Bluffton Parks Department.

Date _____ Signature _____

Printed Name _____

PARENT/GUARDIAN WAIVER AND RELEASE OF LIABILITY FOR MINORS

I, the undersigned, being the parent or legal guardian of the participant who is less than 18 years of age, hereby represent that I have read and understand the foregoing Waiver and Release of Liability. In my capacity as parent./guardian of the participant, and on behalf of the participant, the participant's estate, assigns and successors in interest, I hereby agree to waive and release from liability each of the Releasees as identified above in the same manner as indicated above.

Parent/Guardian Signature for Minor _____

Printed Parent/Guardian Name _____