



Hellgate Village 5 K

July 10 2010

Start Time 5:00 p.m.

Start and Finish at Tent @ Caras Park

Percent of proceeds will be donated to the Missoula Alzheimer's Support Group
In memory of Anne Hayes

You May Also Download This Registration Form From www.missoulamarathon.org



Last Name _____ First Name _____ Middle Initial _____

Address _____ City _____ State/Province _____

Zip/Postal Code _____ Country (other than USA) _____ Email address: _____

Date of Birth _____ Age on Race Day _____ Telephone # (_____) _____

Entry Fees: Run Wild Missoula Member - \$13.00 Family - \$40.00
Non-Member - \$15.00 Family - \$45.00

All finishers receive a prize! First male and female finisher receives a framed print of Missoula.

Make checks payable to: Run Wild Missoula, PO Box 1573, Missoula, MT 59806



Hellgate Chapel

Waiver and Release Statement:

In consideration of accepting this entry, I RELEASE - for myself and my heirs, executors, administrators, legal representatives, assigns and successors in interest, and for my child (if parent or guardian signing on behalf of a participant under the age of 18, referred to as "my child") - the Missoula Marathon, Run Wild Missoula, the City of Missoula, Missoula County and all other promoters, sponsors, organizers and volunteers of this event, and the officers, directors, shareholders and/ or members, agents and employees of each, as well as all medical, law enforcement and other personnel assisting with this event, the owners of property through which the event course traverses, and their representatives, successors and assigns (collectively "Released Parties") from any and all rights, claims or liability for

damage for any and all injuries to me, my child or my property arising out of or in connection with my participation in this event, including acts of God. I further agree that I WILL DEFEND, INDEMNIFY AND HOLD HARMLESS the Released Parties against all claims, demands and causes of action, including court costs and reasonable attorneys' fees, directly or indirectly arising from any action or other proceeding brought by or prosecuted contrary to this Agreement for the benefit of me or my child. This Agreement extends to all claims of every kind and nature whatsoever, whether known or unknown. I FULLY ASSUME THE RISKS ASSOCIATED WITH MY AND/OR MY CHILD'S PARTICIPATION IN THIS EVENT, including but not limited to: the dangers of falls and collisions with pedestrians, vehicles and fixed or moving objects; the dangers of road conditions, surface hazards, weather conditions, and inadequate clothing; encounters with wild or domesticated animals; the possibility of serious physical and/or mental trauma or injury or death associated with an athletic trail run; and dangers caused by others' negligence. I certify that I am and/or my child is physically and mentally fit to participate in this event. I understand that entry fees are necessary to meet the cost of preparation, months in advance of the run, and that if the run is canceled because of weather conditions, fire, drought, acts of God, or other circumstances beyond the control of run management, the entry fee will not be refunded. PARENT OR GUARDIAN MUST SIGN FOR MINOR.

Signature of Participant: _____ Date: _____

Printed Name of Participant: _____

If Participant is younger than 18 years

Signature of Parent/Guardian: _____

Printed Name of Parent / Guardian: _____