



## RUN FOR THE TORCH 5K

JUNE 27 @ 7:00AM

Lake Monticello Golf Course, 51 Bunker Blvd, Palmyra, VA 22963

One registration form is required per participant.

You can also register online at <https://www.badtothebone.biz/>

I plan to:  Run  Walk

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_

T-Shirts will be provided to all runners who pre-register by **June 12, 2015**. Those registering after or on race day will receive shirts on a first-come first-served basis. Available sizes are:

ADULT: S M L XL XXL (Circle One)

**Payment**

____ Pre-registration until 06/12/2015	\$20.00
____ After 06/12/2015	\$25.00
My Personal Donation to help Virginia Special Olympics	_____
Total	_____

\_\_\_\_ Enclosed is my check for \$\_\_\_\_\_ payable to the *FCSO Special Olympics LETR*

Cash payment will be accepted on-site or if you wish to drop your payment by the Fluvanna County Sheriff's Office. No credit/debit cards on-site, credit card registration can only be done online.

Waiver: I hereby declare, assert and affirm that participation in Run for the Torch 5K Run/Walk is done having voluntarily and knowing assumed ALL RISKS involved in this Special Event. The immediate physical risks and hazards associated with normal, vigorous physical activity include (but are not limited to) physical discomfort, fatigue, muscular soreness, falls, pulled or strained muscles, overuse injuries, heat stress, and the rare instance of abnormal responses of the cardio-respiratory system including heart arrhythmia, heart attack, stroke, and sudden death. In consideration of acceptance of this contract allowing my participation in the above stated Special Event and intending to be legally bound thereby, I hereby for myself, my heirs, executors, administrators and assigns, WAIVE AND RELEASE any and all rights and claims for negligence, injuries, damages or losses that I may incur against all participating agencies involved in the above stated Special Event, specifically the Fluvanna County Sheriff's Office, Lake Monticello, Virginia Special Olympics, Bad to the Bone, and any sponsors, their respective employees, agents, representatives, successors and assigns, for any and all activities connected with the above Special Event. I also understand that I do hereby WAIVE any and all rights or benefits under the State of Washington Worker's Compensation laws for any injury incurred as a result of my participation in this event, including disregard of the posted route.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Parent/Legal Guardian must sign if participant is under the age of 18

For questions please contact us on our website <http://fcsorun4thetorch5k.weebly.com> or email Lt. Wells @ [dwells@fluvannasheriff.com](mailto:dwells@fluvannasheriff.com)

Send your completed form to: Fluvanna County Sheriff's Office, Attn: LT Wells, PO Box 113, Palmyra VA 22963 or it may be dropped off at the Sheriff's Office at 160 Commons Blvd. Palmyra, VA.

This is an inaugural event so we thank you for your patience and understanding. It is for a very good cause.