



# 2011 Lake Pahoja 5K



## Saturday, July 23rd 8 am

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

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Male or Female

E-mail \_\_\_\_\_

Amount Enclosed: \$25/person in advance, \$30 day of event

### **Waiver of Liability:**

I, \_\_\_\_\_, the undersigned, hereby understands that the event that I will be participating in requires the ability to run cross-country approximately 3.2 miles over uneven terrain, which could prove to be stressful and physically damaging to my health. Furthermore, I understand that I am required to be in such physical condition that I can sustain the physical demands placed on me by this triathlon event. I represent that I am so conditioned.

I hereby release and discharge the Lyon County Conservation Board, Lyon County, Lyon County Conservation Foundation, and all of its agents, employees and volunteers from any and all claims and liability of any kind whatsoever by reason of any personal injury sustained by me because of participation in this event. I further agree to protect, indemnify, and hold the Lyon County Conservation Board, Lyon County, Lyon County Conservation Foundation, and all its agents, employees and volunteers harmless from any claim or liability by reason of my participation in this event. It is further understood that the Lyon County Conservation Board, Lyon County, Lyon County Conservation Foundation, and all its agents, employees and volunteers are not responsible for loss of any items damaged or stolen during the event.

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

Return to: LCCF, 311 1st Ave E., Rock Rapids, IA 51246