2012 KOMEN NEW HAMPSHIRE RACE FOR THE CURE ENTRY FORM

Last Name _____ First Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Email _____ ☐ I wish to be timed

M M D D Y Y Date of Birth _____ Age on Race Day _____ Gender _____ T-shirt size (S-XXL) _____ ☐ Please send me information about upcoming events.

TYPE OF ENTRY

❑ Individual ❑ Team

Team Name _____

Captain's Name _____

ENTRY CATEGORY (check one)

❑ Coed 5K Run
❑ Coed 5K Walk
❑ Kids' Fun Run

BREAST CANCER SURVIVOR?

❑ I would you like to be recognized as a breast cancer survivor by receiving a complimentary pink cap and t-shirt. How many years of survivorship? _____

PAYMENT (check one)

❑ Check/Money order ❑ Visa ❑ Mastercard

Card # _____

Exp. Date _____

Cardholder Name _____

Signature _____

FEES

$ 35	Timed Runner Registration	$_____
$ 30	Untimed Runner Registration	$_____
$ 35	Timed Walker Registration	$_____
$ 30	Untimed Walker Registration	$_____
$ 15	Kids for the Cure (12 & under)	$_____
$ 35	Virtual Runner (includes t-shirt)	$_____
$ 5	Raffle ticket (5 for $20)	$_____
$ 15	Race Flag (In Memory or Celebration of) #___flags @ $15	$_____
	Pledge money enclosed	$_____
	Tax deductible contribution	$_____
	Total amount enclosed	$_____

Make your check/money order payable to: **Komen NH Race for the Cure.** Mail complete entry form, entry fees and donations to: Komen VT-NH Affiliate, P.O. Box 2496, Manchester Center, VT 05255

Race Course Certification Number — VT97005WN

PHOTOGRAPHIC AND RESULTS RELEASE and WAIVER AND RELEASE OF CLAIMS

I AGREE THAT ANY AND ALL REPRESENTATIONS MADE AND RELEASES, WAIVERS, COVENANTS, CONSENTS AND PERMISSIONS GIVEN BY ME HEREUNDER ARE GIVEN ON BEHALF OF ME AND ANY AND ALL OF MY MINOR CHILDREN OR PERSONS OVER WHOM I HAVE GUARDIANSHIP PARTICIPATING IN OR ATTENDING THE EVENT.

I give my consent and permission to The Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G. Komen for the Cure ("Komen"), its affiliates and races, their sponsors and corporate sponsors, their successors, licensees, and assigns the irrevocable right to use, for any purpose whatsoever and without compensation, (i) any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event (the "Event"); and (ii) the results of my participation in this Event (e.g., race time, name, participant number).

I understand that (i) my consent to these provisions is given in consideration for being permitted to participate in this Event; (ii) I may be removed from this competition if I do not follow all the rules of this Event; and (iii) I am a voluntary participant in this Event. I am in good physical condition and am solely responsible for my personal health, safety and personal property. I KNOW THAT THIS EVENT IS A POTENTIALLY HAZARDOUS ACTIVITY AND I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT THAT MAY OCCUR DURING MY PARTICIPATION IN THIS EVENT OR WHILE ON THE EVENT PREMISES (COLLECTIVELY, "MY PARTICIPATION"). TO THE FULLEST EXTENT OF THE LAW, I, FOR MYSELF, MY NEXT OF KIN, MY HEIRS, ADMINISTRATORS, AND EXECUTORS (COLLECTIVELY, "RELEASORS"), HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST (I) KOMEN, THE VERMONT-NEW HAMPSHIRE AFFILIATE OF SUSAN G. KOMEN FOR THE CURE AND ALL OTHER KOMEN AFFILIATES AND THEIR RESPECTIVE DIRECTORS, OFFICERS, VOLUNTEERS, AGENTS AND EMPLOYEES; (II) ANY EVENT SPONSORS; AND (III) ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT (COLLECTIVELY, THE "RELEASEES") FOR ANY INJURY OR DAMAGES I MIGHT SUFFER IN CONNECTION WITH MY PARTICIPATION. THIS RELEASE APPLIES TO ANY AND ALL LOSS, LIABILITY, OR CLAIMS I OR MY RELEASORS MAY HAVE ARISING OUT OF MY PARTICIPATION, INCLUDING BUT NOT LIMITED TO, PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY FALLS, CONTACT WITH AND/OR THE ACTIONS OF OTHER PARTICIPANTS, CONTACT WITH FIXED OR NON-FIXED OBJECTS, CONTACT WITH ANIMALS, CONDITIONS OF THE EVENT PREMISES, NEGLIGENCE OF THE RELEASEES, RISKS NOT KNOWN TO ME OR NOT REASONABLY FORESEEABLE AT THIS TIME, OR OTHERWISE.

This Photographic and Results Release and Waiver and Release of Claims (collectively, the "Release") shall be construed under the laws of the state in which the Event is held. In the event any provision of this Release is deemed unenforceable by law, (i) Komen shall have the right to modify such provision to the extent necessary to be deemed enforceable; and (ii) all other provisions of this Release shall remain in full force and effect.

I understand that I have given up substantial rights by signing this Release, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent allowed by law.

X _____

Participant's Name Signature Parent's or Guardian's Signature if under age 18 Date