

**Waiver Release for the 5K Run / Walk**

**Participant:** \_\_\_\_\_

**Participant DOB:** \_\_\_\_\_ **Male or Female (circle one)**

**Email address:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

**WAIVER RELEASE**

I hereby certify the following: I am physically fit and have received medical clearance to participate in the Turbine Runner 5K Run/Walk on July 24<sup>th</sup>, 2019 in Portland, OR. If I do participate, I, on behalf of myself, my heirs and assigns, and my estate, hereby waive and forever discharge the sponsors, organizers, board of directors, affiliates, as well as their agents and employees, from any and all claims that may occur as a result of my participation. I also confirm I am over the age of 18.

\_\_\_\_\_ **Date** \_\_\_\_\_

*Signature If under 18, Parent or Guardian's signature*

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