



Presented by:



HALIFAX HEALTH

VOLUSIA FLAGLER FAMILY YMCA



CORPORATE CUP CHALLENGE

This 5k is part of the Corporate Cup standings and open to the whole community as individual and as part of a team.

SATURDAY  
APRIL 21  
8:00 AM

LOCATED AT  
RADIOLOGY ASSOCIATES FIELD AT  
**JACKIE ROBINSON BALLPARK**

Run, walk, or jog with us as part of the Biggest Office Party in Volusia County to promote health in the workplace, teamwork, and a little friendly competition among co-workers.

**ENTRY FEE**

\$27 for 5K before April 19  
\$32 after April 19

\*Shirts only guaranteed before April 10th.

**REGISTRATION**

Register online at VFYMCA.org or runnershighracing.com

Kids 12 & under can run **FREE** with every adult paid entry.

**PACKET PICKUP**

To be determined

**RACE AWARDS**

Top 3 Teams in each group  
Top 3 finishers in each age group

**SPECIAL THANKS TO OUR SPONSORS:**



**CORPORATE TEAMS**

Corporate teams are encouraged to join the Corporate Cup and to compete in the 5K event.

Corporate Teams will be scored and awarded points for the Corporate Cup.

For questions regarding team creation or registration contact Mica Lill at mlill@vfymca.org.

**Stay for Healthy Kids Day immediately following the race!**

Hosted by:



**SPECIAL STUFF**

Participants will enjoy a goodie-bag, and race shirt. Shirt size not guaranteed for registrations received after April 10th.

For more information, please contact Mica Lill at mlill@vfymca.org or call 386-425-5210.

**VOLUSIA FLAGLER FAMILY YMCA | VFYMCA.ORG**  
**TOGETHER WE CAN BUILD A BETTER US**



# RELEASE AND WAIVER OF LIABILITY/ INDEMNITY AGREEMENT

**Volusia Flagler Family YMCA,  
Halifax Health and Runner's High**  
(Hereafter referred to as VFYMCA/HH/RH)

**Corporate 5K**



Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone number (\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

M  F  Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Corporate Cup Team \_\_\_\_\_

Check here to donate to the Volusia Flagler Family YMCA Annual Support Campaign \$ \_\_\_\_\_

### T-SHIRT

ADULT  XS  S  M  L  XL  XXL

YOUTH  S  M  L

Amount Enclosed \$ \_\_\_\_\_

Participating in the LYLW Series

Team Name \_\_\_\_\_

Enclosed is my check payable to the Volusia Flagler Family YMCA

### MAIL ENTRY FORM TO:

**Volusia Flagler Family YMCA**  
761 E. International Speedway Boulevard  
DeLand, FL 32124

**Att: Mica Lill**

Register online at [www.runnershighracing.com](http://www.runnershighracing.com)

### 2018 Volusia Flagler Family YMCA/Halifax Health/Runners High (VFYMCA/HH/RH) – RELEASE FORM

ENTRANT'S RELEASE: ENTRY INVALID IF NOT SIGNED. In consideration of being allowed to participate in the VFYMCA/HH/RH and its related events (collectively "Event"), I, the undersigned, on behalf of myself and my heirs, assigns, personal representatives, administrators, estate and next of kin, acknowledge, appreciate and agree that by my signature and of my free will, I HEREBY VOLUNTARILY, IRREVOCABLY AND FOREVER RELEASE, INDEMNIFY AND SAVE HARMLESS VFYMCA/HH/RH, its officers, directors, board members, employees, volunteers, agents, independent contractors, sponsors, owners and/or lessors of any premises, property or piece of equipment used to conduct Event, each of the foregoing parties' respective affiliates, and each of the foregoing parties' respective current and former owners, partners, members, officers, directors, trustees, employees, agents, volunteers, officials, representatives, successors, assigns and other participants (collectively, "RELEASEES") FROM ANY AND ALL LIABILITY WHATSOEVER, INCLUDING WITHOUT LIMITATION, LIABILITY FOR ANY AND ALL INJURIES, DISABILITIES, DEATH, LOSSES OR DAMAGES TO PERSON OR PROPERTY, ARISING DIRECTLY OR INDIRECTLY IN CONNECTION WITH MY PARTICIPATION IN EVENT, WHETHER OR NOT CAUSED BY THE INTENTIONAL CONDUCT, ACTIVE OR PASSIVE NEGLIGENCE, MISREPRESENTATION OR OTHER FAULT OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law;

I assume all risk associated with the Event, including but not limited to conditions of the road, uneven and/or slippery conditions, varying weather and surface conditions, varying slopes, loose gravel and dirt, wet surfaces, holes and potholes, bikes, vehicles, strollers, animals, and paved and unpaved surfaces, other participants, and traffic. All such risks being known and appreciated by me, I willingly agree to comply with the stated and customary terms and conditions for participation in Event. If, however, I observe any unusual significant hazard during my presence at or participation in Event, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately. I willingly agree to read and follow all rules for participation in Event and any safety materials or instructions provided by Event, including all information in the Event packet. I expressly assume the responsibility for any and all acts committed by my dog(s) that result in bodily injury or property damage. I am physically capable of participating in Event. If I am aware of or under treatment for any physical infirmity, ailment or illness, I will obtain my medical care provider's approval to participate in Event and I will maintain personal health insurance while participating in Event. I consent to treatment in the event of an emergency or other incident in which, in the reasonable judgment of the on-site personnel, I require medical care.

I hereby irrevocably release, consent and allow the VFYMCA/HH/RH to use my/our photographs, voice, likeness, as it pertains to my/our participation with the YMCA, in any manner for promotional efforts without expectation of any reimbursement in connection with its use.

I grant permission to use my email address and understand that it will be used to provide monthly updates about races and events. Further, I grant permission to all the foregoing to use my name and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic record of this event for legitimate purposes.

**I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND THE TERMS, UNDERSTAND THAT I HAVE GIVEN UP CERTAIN RIGHTS BY AGREEING TO THE TERMS, AND AGREE TO THE TERMS FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I AM AWARE THAT BY SIGNING THIS WAIVER, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT OR BY SELECTING THE "I ACCEPT" BUTTON DURING THE ONLINE REGISTRATION PROCESS, I AM AGREEING TO ITS TERMS, INCLUDING WAIVING CERTAIN LEGAL RIGHTS. KNOWING THIS, I AGREE TO THESE TERMS OF MY OWN FREE WILL.**

\_\_\_\_\_  
\*PRINT\* NAME OF RUNNER

\_\_\_\_\_  
RUNNER / PARENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
IF ENTRANT IS UNDER AGE 18 PARENT/GUARDIAN MUST SIGN