



**Saturday March 21, 2020**



**Hayward Area Memorial Hospital & Water's Edge**  
*Right here in the place we love.*

**Presented By**  
**Hayward Area Memorial Hospital & Water's Edge**

A portion of Registration Going to Support The Nordic Kids of Hayward  
 If you would like to add an additional donation please specify.  
 \$5  \$10  \$15  Other

**TEAM REGISTRATION FORM & FEE**  
**5K TEAM RUN w/5 T-Shirts \$125 per/Team**

**NOTE: TEAM BIB PICKUP IS FRIDAY, MAR 20TH, 3PM - 5PM AT OUTDOOR VENTURES**

**TEAM Name:** \_\_\_\_\_

**First (Captain) Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

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

**Age:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_ **Male:**  **Female:**  \_\_\_\_\_  
 SHIRT SIZE

**Payments:** You may pay with cash or check at the Outdoor Ventures Store. If you pay with credit card a fee will incur. No Refunds or Transfers. **If you prefer to send a check, please mail to: Outdoor Ventures PO Box 1011 Hayward, WI 54843**

Please review & sign the waiver for your team below. The captain of the team is responsible for collecting payment, being responsible to fill out the entire form for each participant on the team and the total payment for the Team's entrance into the Race.

I, the undersigned, know and acknowledge that running is an action adventure sport carrying significant risks of personal injury and that racing heightens those inherent risks even more. I know that there are natural and man-made obstacles and hazards that exist, which, in combination with my actions and the actions of other people can cause me or others severe or even fatal injury. I agree that I am totally responsible for my safety while participating in or training for this event and not Outdoor Ventures S&E Wisconsin Property, City of Hayward, volunteers, representatives, agents, officials and sponsors. I hereby release and discharge, in advance, all organizations listed above and any other person or organization connected with this event and competition from any and all claims, liabilities, or rights to damages for any injury, damage or loss whatsoever ( directly or indirectly) arising from my ( or my family members) participation or presence at these events. I agree to accept all responsibility for the risks, conditions, hazards which may occur whether they are known or unknown. I further agree to forever hold harmless and indemnify all persons and entities identified above, generally and specifically from any and all liability for death, personal injury, or property damage, resulting in any way of my participating in, or training for, this competitive event, even that liability which may arise out of negligence or carelessness on the part of persons or entities identified above from providing this coverage for me. I hereby give Outdoor Ventures, and its successors and assignees, the right to use, reproduce and distribute my photograph for educational publication or marketing purposes without any compensation to me.

**Signature X:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Signature of Parent/Legal Guardian X:** \_\_\_\_\_