



# REGISTRATION FORM

**SELFLESS ELF 5K RUN/WALK**  
BENEFITING THE AKRON-CANTON REGIONAL FOODBANK

RUNNER'S INFO			
Runner's Name		Group/Organization (if applicable)	
Address		City & State	Zip Code
Email Address		Home Phone	Work/Cell Phone
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth / /	T-Shirt Size <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL	Do you plan to become a <b>VIP ELF</b> by raising more than \$250 in pledges? <input type="checkbox"/> Yes <input type="checkbox"/> No

**PLEASE READ ANY WAIVER CAREFULLY.** It includes a release of liability and waiver of legal rights and deprives you of the ability to sue certain parties. Do not agree to this document unless you have read and understood it in its entirety. By agreeing you acknowledge that you have both read and understood the text presented to you as part of the registration process. You also understand and agree that events carry certain inherent dangers and risks which may or may not be readily foreseeable, including without limitation personal injury, property damage or death. Your ability to participate in the event(s) is/are subject to your agreement to the waiver and by agreeing herein, you accept and agree to the terms of the waiver and release agreement.

Authority to Register and/or to Act as Agent. You represent and warrant to the Akron-Canton Regional Foodbank that you have full legal authority to complete this event registration on behalf of yourself and/or any party you are registering (the "Registered Parties"), including full authority to make use of the credit or debit card to which registration fees will be charged. As used in this Agreement and Waiver, Foodbank refers to the Akron-Canton Regional Foodbank and any and all subsidiaries, affiliated entities, or entities that control or are controlled by Foodbank singly or together and its officers, employees, contractors, subcontractors and agents.

If you are registering a child under the age of 18 or an incapacitated adult you represent and warrant that you are the parent or legal guardian of that party and have the legal authority to enter into this agreement on their behalf and by proceeding with this event registration, you agree that the terms of this Agreement and Waiver shall apply equally to all Registered Parties. By registering a child under 13, you agree and consent to the collection of that child's information which you provide for the purposes of registration.

**WAIVER.** You understand that participation in the event is potentially hazardous, and that a registered party should not participate unless they are medically able and properly trained. You understand that events may be held over public roads and facilities open to the public during the event and upon which hazards are to be expected. Participation carries with it certain inherent risks that cannot be eliminated completely—ranging from minor injuries to catastrophic injuries including death. You understand and agree that in consideration of being permitted to participate in the event, you and any registered party, the heirs, personal representatives or assigns of you or the registered party do hereby release, waive, discharge and covenant not to sue the Foodbank for any and all liability and from any and all claims arising from participation in the event by you or any registered party.

**INDEMNIFICATION.** You agree to indemnify and hold each the Foodbank and all staff harmless from and against any and all damages, costs, claims or demands, including reasonable attorneys' fees, made by any third party due to or arising from or relating to your participation (walking or running in the Selfless Elf event) or the violation of any term of this Agreement and Waiver.

BY INDICATING YOUR ACCEPTANCE OF THIS AGREEMENT AND WAIVER, YOU ARE AFFIRMING THAT YOU HAVE READ AND UNDERSTAND THIS AGREEMENT AND WAIVER AND FULLY UNDERSTAND ITS TERMS. YOU UNDERSTAND THAT YOU ARE GIVING UP SUBSTANTIAL RIGHTS, INCLUDING THE RIGHT TO SUE. YOU ACKNOWLEDGE THAT YOU ARE SIGNING THE AGREEMENT AND WAIVER FREELY AND VOLUNTARILY, AND INTEND BY YOUR ACCEPTANCE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Signature (**SIGN ONLY IF YOU ACCEPT/AGREE**)

Date