

WAIVER AND RELEASE OF LIABILITY

ALL PROCEEDS BENEFIT:

Printed Name of Participant _____

Date of Birth: _____

Printed Name of Parent or Guardian (if participant is under 18) _____

Date of Birth: _____

Every participant in the Trinity Mother Frances SportsCARE / Jacksonville ISD 5K Run (or the participant's parent or guardian if the participant is under 18) must read and sign this waiver form prior to participating. Signatures on this form indicate and attest that each person signing has read, understands, and agrees to the following statements and information.

1. I understand that there are risks associated with my participation in this program and its related activities.
2. If the participant is under 18 years of age, I understand that there are risks associated with his or her participation in this event and its related activities. He or she has my permission and consent to participate in the Trinity Mother Frances SportsCARE / Jacksonville ISD 5K Run.
3. I release, discharge, indemnify, and hold harmless Trinity Mother Frances Health System, Mother Frances Hospital Regional Health Care Center, Trinity Clinic, SportsCARE, Jacksonville ISD, and their subsidiaries, affiliates, directors, officers, or employees, from all liability, actions, suits and demands whatsoever, in law or in equity, for losses or damages of any nature resulting from or relating to participation in the 5K Run and alleged to be caused in whole or in part by the acts or omissions of any of the above parties or by any other cause. I hereby waive any right to assert such a claim or cause of action against any of the above-named parties.
4. I grant full permission for the event organizers to record any or all of my (or my child's) participation in this event for photos, motion pictures, TV, radio, recordings, videotapes, and other media known or unknown, and to use such recordings or images, no matter by whom taken, in any manner for publicity, promotions, advertising, trade, or commercial purposes, without any fee or reimbursement of any kind due to me.

Participant's Signature _____

Parent or Guardian's Signature (if participant is under 18) _____




JISD Health Services

Jacksonville, Texas

“Sharpening Skills, Challenging Minds”

Proceeds from the race are used to help fund programs for Jacksonville ISD Health Services. Last year's race allowed us to purchase 2 walking programs, "Accu Step" with curriculum and pedometers for PE students at Jacksonville Middle School.


TRINITY MOTHER FRANCES
 SPORTSCARE®
 800 E. Dawson • Tyler, TX 75702



May 24, 2008

Jacksonville High School Mauldin Field

Non-Profit
 Org
 US Postage
 PAID
 Permit #852
 Tyler TX


TRINITY MOTHER FRANCES
 SPORTSCARE®
www.tmfhs.org

AWARDS

COURSE MAP

REGISTRATION FORM

Awards will be given to the First place Male & Female in the following age divisions:

- 0-9 • 10-14 • 15-19 • 20-24
- 25-29 • 30-34 • 35-39 • 40-49
- 50-59 • 60-69 • 70+

**PRE-REGISTRATION BEFORE
MAY 16, 2008 - \$10.00**

Late registration after
May 16, 2008 - \$15.00

Mail-in Registration:

Must be postmarked by May 16, 2008
Make check payable to:
Jacksonville ISD

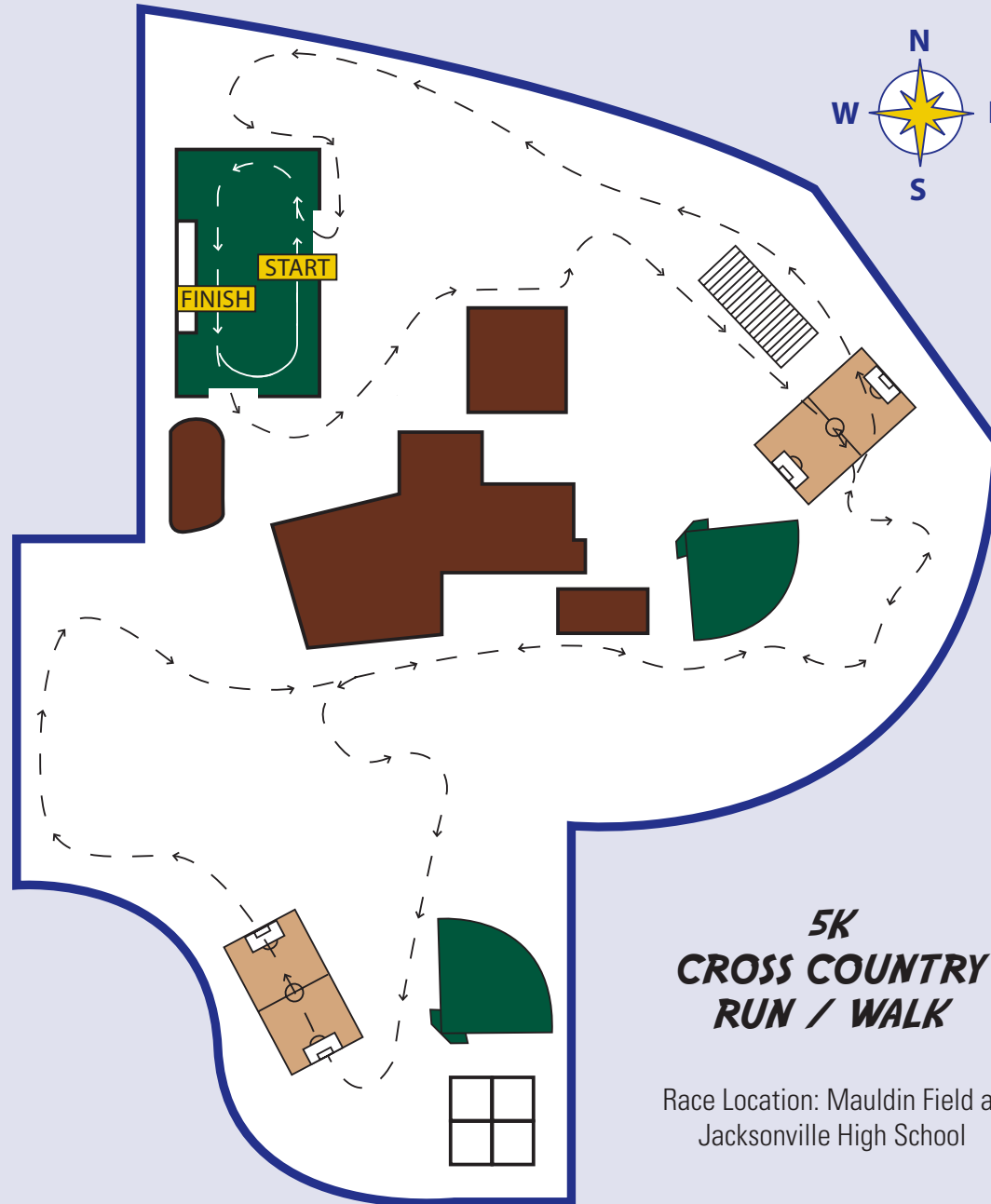
Mail to:

JISD Health Services
Attn: Jamie Maddox / JMS
P.O. Box 631
Jacksonville, TX 75766

**FOR MORE INFORMATION CALL:
(903) 586-3686 • (903) 531-5930**

7:00 - Registration / Check-in
8:00 - 5K
9:30 - Awards

* Race will not be rescheduled for inclement weather and registration fee will be a donation to JISD Health Services.



5K CROSS COUNTRY RUN / WALK

Race Location: Mauldin Field at
Jacksonville High School

Mail entry to:

JISD Health Services
Attn: Jamie Maddox / JMS
P.O. Box 631
Jacksonville, TX 75766

Make checks payable to:

Jacksonville ISD

First Name: _____

Last Name: _____

Age as of 5/24/08: _____

Sex (circle): Male Female _____

Shirt Size (circle one): YS YM YL S M L XL _____

Date of Birth (mo/day/yr): _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Phone: _____

Email: _____

In order to participate, the Waiver and Release on the back of the Registration Form must be signed and dated.