

Run Bike Run of the Lowcountry

Saturday, June 25 • 8:00am

Team Relay Entry Form

Entry Fees:

\$65 Pre-Registration thru 6/20 OR \$75 thru 6/25

Distance: 5K, 20K, 5K

Divisions: Male, Female, Mixed

Relay teams must consist of 2 Runners and 1 Cyclist

Awards: Awards to top 3 each division

NO DUPLICATIONS

More event details: www.bearfootsports.com



run  bike  run

(Please choose division by checking one) Male Relay Female Relay Mixed Relay

Team Name _____

RUNNER #1

First Name: _____ Last Name: _____

Address: _____ City _____ State _____ Zip _____

Ph. _____ Male Female

Adult Shirt Size: (circle one) S M L XL (XXL only \$3 additional)

In consideration of your accepting me/my child's registration, I herby for myself, my child, my heirs, executors and administrators waive and release any and all rights and claims for damages I or my child may have against Bear Foot Sports, including all representatives who are in any way connected with this event/program. Further, in the event of any injury, I do hereby give permission and consent to authorize such First Aid and/or Medical and/or Hospital care or treatment as deemed appropriate. In addition, I am fully aware of the provisions covered by the fee for this event and I understand that if any emergency arises, any and all additional expenses incurred must be borne or assumed by the participants. Bear Foot Sports has permission to take photographs of my child or myself while participating in any Bear Foot Sports events. I understand that these photographs may be used for Bear Foot Sports advertising and public relations through and not limited to brochures, flyers, or newspapers.

Signature: Participant/Parent/Guardian _____

BIKER

First Name: _____ Last Name: _____

Address: _____ City _____ State _____ Zip _____

Ph. _____ Male Female

Adult Shirt Size: (circle one) S M L XL (XXL only \$3 additional)

In consideration of your accepting me/my child's registration, I herby for myself, my child, my heirs, executors and administrators waive and release any and all rights and claims for damages I or my child may have against Bear Foot Sports, including all representatives who are in any way connected with this event/program. Further, in the event of any injury, I do hereby give permission and consent to authorize such First Aid and/or Medical and/or Hospital care or treatment as deemed appropriate. In addition, I am fully aware of the provisions covered by the fee for this event and I understand that if any emergency arises, any and all additional expenses incurred must be borne or assumed by the participants. Bear Foot Sports has permission to take photographs of my child or myself while participating in any Bear Foot Sports events. I understand that these photographs may be used for Bear Foot Sports advertising and public relations through and not limited to brochures, flyers, or newspapers.

Signature: Participant/Parent/Guardian _____

RUNNER #2

First Name: _____ Last Name: _____

Address: _____ City _____ State _____ Zip _____

Ph. _____ Male Female

Adult Shirt Size: (circle one) S M L XL (XXL only \$3 additional)

In consideration of your accepting me/my child's registration, I herby for myself, my child, my heirs, executors and administrators waive and release any and all rights and claims for damages I or my child may have against Bear Foot Sports, including all representatives who are in any way connected with this event/program. Further, in the event of any injury, I do hereby give permission and consent to authorize such First Aid and/or Medical and/or Hospital care or treatment as deemed appropriate. In addition, I am fully aware of the provisions covered by the fee for this event and I understand that if any emergency arises, any and all additional expenses incurred must be borne or assumed by the participants. Bear Foot Sports has permission to take photographs of my child or myself while participating in any Bear Foot Sports events. I understand that these photographs may be used for Bear Foot Sports advertising and public relations through and not limited to brochures, flyers, or newspapers.

Signature: Participant/Parent/Guardian _____

Please make check payable and mail to
BEAR FOOT SPORTS
20 Towne Drive - PMB#200 • Bluffton, SC 29910
ph. 843/757-8520 • www.bearfootsports.com

