



# Raiders Cross Country

## Grand View Days

### 5K Fun Run

Walkers and runners of all ages and abilities are welcome

**June 11, 2022 8:00 am**

Pre-registration Form Due May 31, 2022 (race day registration also available)

\*One form required per participant

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_\_\_

T-Shirts will be provided to all pre-registered runners. Those registering on race day will receive shirts on a first-come first-served basis. Available sizes are:

YOUTH: S M L      ADULT: S M L XL XXL (Circle One)

Payment

\_\_\_ Individual      \$20.00

\_\_\_ Family (min. 1 adult)      \$50.00

Total \_\_\_\_\_

Enclosed is my registration check for \$\_\_\_\_\_ payable to Rimrock Cross Country

I would like to donate \$\_\_\_\_\_ to the cross country team (optional)

**\*All profits from the race will benefit the Rimrock Cross Country Boys/Girls Teams**

**\*Please mail forms to Melissa Raymond, 1620 W Whitted Rd, Grand View, ID 83624**

**For questions please contact Melissa Raymond 208-863-0335**

**Waiver: I hereby declare, assert and affirm that participation in Grand View Days PTA 5K Run/Walk is done having voluntarily and knowing assumed ALL RISKS involved in this Special Event. The immediate physical risks and hazards associated with normal, vigorous physical activity include (but are not limited to) physical discomfort, fatigue, muscular soreness, falls, pulled or strained muscles, overuse injuries, heat stress, and the rare instance of abnormal responses of the cardio-respiratory system including heart arrhythmia, heart attack, stroke, and sudden death. In consideration of acceptance of this contract allowing my participation in the above stated Special Event and intending to be legally bound thereby, I hereby for myself, my heirs, executors, administrators and assigns, WAIVE AND RELEASE any and all rights and claims for negligence, injuries, damages or losses that I may incur against all participating agencies involved in the above stated Special Events including their respective employees, agents, representatives, successors and assigns, for any and all activities connected with the above Special Event.**

**Print Name \_\_\_\_\_ Date \_\_\_\_\_**

**Signature \_\_\_\_\_ Parent/Legal Guardian must sign if  
participant is under the age of 18**