# MELROSE Riverfest 1K|5K

## Saturday, June 30, 2018

Sauk River Park, Melrose
9 a.m. – 1k Kids Run
9:15 a.m. – 5k Run/Walk

**Name:** _____ **Date of Birth:** _____ **Age:**_____

**Phone:** _____ **Gender:** M F **Email:** _____

**Address:** _____

**City:** _____ **State:** _____ **Zip:** _____

**Type of registration (please circle):** 5k Run/Walk 1k Kids Run

**T-shirt Size (circle):**
Register by June 14 to be guaranteed a shirt

| Adult | | | | | Youth | | | |
|---|---|---|---|---|---|---|---|---|
| Small | Medium | Large | XL | XXL | Small | Medium | Large | XL |

**Make Check Payable to:**
Melrose Area Chamber of Commerce

**Mail to:** Melrose Riverfest 1k/5k
223 Main St E
Melrose, MN 56352

**Packet Pick-up:** June 30 8-8:40 a.m. at the Sauk River Park

Professionally timed by Gopher State Events

**Payment:**

**5k Run/Walk**
Postmarked by June 14 $15 _____ **Family Price $12 _____
After June 14 $20 _____ **Family Price $17 _____

**1k Kids Run**
Postmarked by June 14 $10 _____ **Family Price $7 _____
After June 14 $15 _____ **Family Price $12 _____

****Family Price****
Take $3 off each registration, if registering three people or more

**VOLUNTARY WAIVER OF LIABILITY AGREEMENT:**

I wish to participate in Melrose Chamber of Commerce Riverfest 1K & 5K Run/Walk (the "Activity") on June 30, 2018. I state and affirm that: My participation is voluntary. No one is forcing me to participate. I understand and acknowledge the Activity I am about to voluntarily engage in as a participant has certain risks, including, but not limited to, bruises, cuts, sprains, strains, broken bones, and cardiac arrest. I understand these risks, known or unknown, anticipated or unanticipated, may result in injury, death, illness, disease, or damage to myself or my property, or to other persons and their property. In consideration of being allowed to participate in this Activity, I hereby assume all risks in connection with this Activity and I hereby agree to hold the Melrose Chamber of Commerce (the "Chamber"), its officers, employees, agents, volunteers, and contractors harmless; I waive any right to make claims or bring lawsuits against the Chamber, or anyone acting on behalf of the Chamber, for any injuries or damages related to the alleged negligence of the Chamber. This waiver does not apply to any injuries or damages that are the result of any willful, wanton, or intentional misconduct by the Chamber, or anyone acting on behalf of the Chamber. I understand that entering into and signing this agreement affects my legal rights and result in my giving up or waiving certain legal rights, and I accept this agreement of my own free will. The terms of this agreement shall bind the members of my family, if I am alive, and my heirs, assigns, and personal representatives if I am deceased. I understand and agree that any sponsor may use my name and/or photographs of me participating in this event for publicity/promotional purposes without any obligation to me. I understand that the fees are non-refundable. My signature indicates I have read this entire document, understand it completely, acknowledge that it cannot be modified or changed in any way by oral representations, and I agree to be bound by its terms.

_____
Participant Printed Name

_____ _____
Participant Signature Date

_____ _____
Parent or Guardian Signature if participant is under 18 Date

THIS EVENT IS SPONSORED BY THE MELROSE AREA CHAMBER OF COMMERCE along with the Central Minnesota Credit Union, State Farm Insurance-Pierskalla Agency, SNAP Fitness of Melrose, Freeport State Bank, Neighborhood Realty, Melrose Pharmacy, Bernick's, Melrose Women of Today, New Munich Jaycees and CentreCare Health-Melrose.

*More event information & on-line registration can be found at www.melrosemn.org*