

Dundee Township
Park District



5K Pre-Registration Form

Race Start Time - 8:00 am

Race will begin at the Depot in East Dundee
(Intersection of River St. and Barrington Ave.)

Entry Fee 5K \$20

Awards Ceremony Starts after Kids 1/2 mile (~ 9:15 am)

Sponsored By



Dundee Township Park District
665 Barrington Ave. • Carpentersville
(847)428-7131 • www.dtpd.org

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

Age (as of 6/20) _____

Birthdate _____

Sex: M F Race: 5K (209008-00)

T-shirt size: Child S Child M Child L

Adult M Adult L Adult XL

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the below identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs/activities against the Dundee Township Park District including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name _____

Participant's Signature _____ Date _____
(18 years or older or Parent/Guardian)

PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian and date are not on this waiver.

Payment Method Cash Check

Check Number _____

Credit Card _____ Credit Card Number _____

Expiration Date _____ Signature _____

Make checks payable to: Dundee Township Park District
Mail, fax, or drop off form and payment to: Dundee Township Park District • 665 Barrington Ave. • Carpentersville, IL 60110
Fax: (847) 836-2380 For more information, call (847) 428-7131

Dundee Township
Park District



Kids Fun Runs Pre-Registration Form

Race Start Times

Kids 1 mile (8-11 yrs) **8:45 am**

Kids 1/2 mile (4-7 yrs) **9:00 am**

Race will begin at the Depot in East Dundee
(Intersection of River St. and Barrington Ave.)

Entry Fee

Kids 1 Mile Run **\$10**

Kids 1/2 Mile Run **\$10**

Sponsored By



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(847)428-7131 • www.dtpd.org

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

Age (as of 6/20) _____

Birthdate _____

Sex: M F 1 mile (209008-01) 1/2 mile (209008-02)

T-shirt size: Child S Child M Child L

Adult M Adult L Adult XL

Payment Method Cash Check

Credit Card _____

Expiration Date _____

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK
Please read this form carefully and be aware that in signing up and participating in the below identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services and vehicle operations, when provided).
I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs/activities against the Dundee Township Park District including its officials, agents, volunteers and employees.
I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.
Participant's Name _____
Participant's Signature _____ Date _____
(18 years or older or Parent/Guardian)
PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian and date are not on this waiver.

Check Number _____

Credit Card Number _____

Signature _____

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