



Join us at our 26<sup>th</sup> Annual Firecracker 5K Run.

**Race starts & ends: Cub Lake Entrance**

**Saturday: July 3<sup>rd</sup>, 2021**

**Check in time: 7:15 am**

**Race starts: 7:45 am**

**Early Reg. (by May 31<sup>st</sup>) Fee: \$25**

**June 1<sup>st</sup> – June 12<sup>th</sup> Fee: \$30**

**Day of Event Fee: \$35**

Checks payable to: BVSA (Only Residents can write checks.)

Bring completed form with payment to

the WHITING CENTER.

Questions? Feel free to call the

Whiting Center at (661) 821-6641

Registration Date\_\_\_\_\_

Name\_\_\_\_\_ Age\_\_\_\_\_

Sex:     Male            Female    (Circle one)

Phone\_\_\_\_\_

Address\_\_\_\_\_

Tract/Lot: \_\_\_\_\_

T-shirt Sizes:   S    M    LG    XLG    (Circle one)

Sizes Available: **Men's Adult**

**Emergency Medical Care:** I give my permission to the Association, its employees, agents and representatives, and/or the person or entity engaged to conduct the Activity, to obtain emergency medical care for me, is considered by them to be necessary. In case of an emergency, the following person(s) should be contacted:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**(MUST BE SOMEONE NOT PARTICIPATING IN THE EVENT)**

**Waiver (Must be signed by each participant registered)**

**ASSUMPTION OF RISK** I, on behalf of myself and/or my minor, **ASSUME ALL OF THE RISKS THAT MAY OR CAN ARISE OUT OF PARTICIPATING IN THE 5K RUN, INCLUDING BUT NOT LIMITED TO THE ATHLETIC ACTIVITY ITSELF, USE OF THE EQUIPMENT, FIELD OR FACILITIES, THE ACTS OF OTHERS OR THE UNAVAILABILITY OF EMERGENCY CARE**, as well as those Risks described in the preceding paragraph. **RELEASE/WAIVER** In consideration for being permitted to participate in the 5K RUN, I, on behalf of myself and/or my minor and/or our heirs, personal representatives and assigns **HEREBY RELEASE, WAIVE, AND DISCHARGE BVSA** from any and all liability associated with or related to my or my minor's participation in the Activities and agree **NOT TO SUE BVSA** for any reason resulting from or associated with my or my minor's participation in Activities. This waiver and release is intended to include all claims of injuries, accidents, illnesses, or property loss, whether known or unknown or anticipated or unanticipated, which are in any way related to or associated with the Activities. ***Athlete has read the foregoing and intentionally and voluntarily signs the release and waiver of liability agreement.***

**X**

**SIGN AND DATE**

**(MUST BE SIGNED BY A PARENT OR LEAGAL GUARDIAN IF PARTICIPINT IS UNDER THE 18 YEARS.)**