



Come support the WCU Sport Management Scholarship Fund! **September 24th, 2016**

Time: Race day check-in 6:45 - 7:45 a.m.

Race begins at 8 a.m. at the Stillwell Building on the WCU campus.

Participants: All 5K entrants must register and sign *Race Waiver* prior to participation. Entrants under the age of 18 must have a parent or guardian sign the *Race Waiver* on the back of registration form. Entrants may prepay online, mail in cash, check, money orders, or pay day of race with cash, check, credit card or money order.

Entry Fees:

WCU Student Pre-register (Bring CatCard on race day for student verification)	\$10
Non WCU student Pre-register	\$15
All Race Day Registration	\$20

Course: Each year the course committee creates a challenging course around the campus of WCU. All runners and walkers will have **50 minutes** to complete the race. *Restrooms* available in the Stillwell Building.

Awards: Medals for the top three in each age group and overall male and female winners will have their names engraved on the **WCU 5K CUP**.

Age categories:

17 & under, 18-29, 30-49, 50 & up.

More Information & online sign-up:

<https://runsignup.com/Race/NC/Cullowhee/MountHeritage5k>

Race t-shirt guaranteed to first 100 participants!

Water and fruit will be provided to all 5K participants.

Make Checks Payable to:

WCU Sport Management Association
Western Carolina University
104 Forsyth Bldg., Cullowhee, NC 28723

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age on 9/24: _____ Sex: _____ E-mail address: _____

Emergency Contact: _____ Contact # _____

Entry Fee:	WCU Student Pre-Reg	Non-student Pre-Reg	Race Day Registration
(check one)	_____ \$10	_____ \$15	_____ \$20

Western Carolina University Running and Race Assumption of Risk and Release/Waiver of Claims

Participating in the Mountain Heritage Day 5K/Fun run at Western Carolina University may involve substantial risks of bodily injury and other dangers associated with participation in the activities. Risks include, without limitation, broken bones, strains, sprains, abrasions, lacerations, concussions, heart attacks, and perhaps even death.

I acknowledge and understand the risks inherent in participating in the activities. I also understand that I should participate only in those activities for which I have the prerequisite skills, qualifications, and training, and that are appropriate based upon my medical/health history. I understand that I should consult my own personal physician if I have any questions about whether my participation in the activities is appropriate. I understand that I am solely responsible for the payment of any costs related to injury or illness sustained through or related to my participation in the activities, or related to the loss or damage of personal property while participating in the activities.

I voluntarily and expressly accept and assume all risks, hazards, and dangers inherent in participating in the activities.

I hereby agree, for myself and on behalf of my successors, heirs, and assigns, that for the sole consideration of Western Carolina University making available certain equipment, facilities, and/or personnel of the university and allowing me to participate in the activities, I hereby waive any and all claims and release and forever discharge Western Carolina University and the Board of Governors of the University System of North Carolina, and their directors, trustees, officers, agent or employees from any and all actions, claims, damages, judgments, demands, rights, and causes of action of whatever kind or nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries or damage to property arising out of or related to my voluntary participation in the activities. I further agree that for the sole consideration stated above I will not sue Western Carolina University or the University of North Carolina and their directors, trustees, officers, agents or employees for any claim for damages arising out of or related to my voluntary participation in the activities.

This Assumption of Risk and Release/Waiver of Claims shall remain in effect for as long as I am a participant in the activities. Further, I understand that, if I am an employee or student at Western Carolina University, this Assumption of Risk and Release/Waiver of Claims shall be effective during the entire period of my enrollment or employment. Should my health change, I understand it is my responsibility to notify the staff of the race of these changes, and that I may be asked to present a physician's release in order to return to participating in activities within the center.

I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that bicycles, skateboards, baby joggers, roller skates or inline skates and animals are not allowed in the event and I will abide by this guideline. I am aware that Western Carolina University strongly discourages the use of personal audio devices (iPods and MP3 headsets).

I certify that I am at least 18 years of age, have the capacity to enter into this agreement, and that I have carefully read and understand this Assumption of Risk and Release/Waiver of Claims, and agree to be bound by the terms contained herein.

Signature: _____ Printed Name: _____

Date: _____ Emergency Contact: _____ Phone: _____

If the participant is under the age of 18, the parent or legal guardian certifies that he/she has carefully read and understands this Assumption of Risk and Release/Waiver of Claims, and agrees to be bound by the terms contained herein.

Signature of Parent or Legal Guardian: _____ Date: _____

Printed Name of Parent or Legal Guardian: _____

Emergency Contact: _____ Phone: _____