

GLOW RUN 2017

Date:
Friday, 9/29

Time:
5:30pm-9:00pm



Registration opens at 5:30pm

Please join us for a very fun community event for the 2017-2018 school year! The PTO's Glow Run will be a 1-mile Glow Walk/Run and SO much more! We will have food concessions, Kona Ice Truck, Extreme Obstacle Course, Bounce House, Mini-Golf, Face-painting, games, music & dance.

Glow Run Schedule:

5:30pm-6pm

Pick-up Registration package(s) and Purchase entertainment wristbands

6pm

Music and Games

7:30pm

Line up for Glow Walk/Run

Dusk

Walk/Run begins...and off we go!

Entry/Registration:

Name _____

Email _____

Child's name _____

Homeroom Teacher _____

Grade _____

I would like to volunteer

Phone _____

Participation Packages:

Shirt sizes: YOUTH: M, L
ADULT: S, M, L, XL, XXL (+\$2), XXXL (+\$4)

Glow Participant: \$10 (until 9/20). After 9/20 and on-site: \$15. INCLUDES: Entry Fee/Registration, T-shirt, Glow Band. *

Family of 4 Glow Participants: \$25 (until 9/20). After 9/20 and on-site: \$30. INCLUDES: Everything in #1 per person. *

Additional Family Members: \$5 PER RUNNER. INCLUDES: Everything in #1. *

** Face painting not included in any package.*

Participant Name _____

Shirt size _____

Participant Name _____

Shirt size _____

Participant Name _____

Shirt size _____

Participant Name _____

Shirt size _____

Participant Name _____

Shirt size _____

AMOUNT TOTAL \$ _____

Office Use:

Cash \$ _____ / Check \$ _____ # _____

Waiver:

In consideration for the acceptance of my registration as a participant in the Glow Walk/Run, and with my understanding that my participation in this event is only on condition that I enter into this agreement, for myself, my heirs and assignees, I hereby assume the inherent and extraordinary risks involved in the Glow Walk/Run and any risks inherent in any other activities connected with this event in which I do voluntarily participate. I hereby release from liability, C. T. Koontz Intermediate School and each of its officers, director and agents, representatives, employees, volunteers and members (hereinafter referred to as releases). I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by me, or any loss or damage of property owned by me, as a result of being engaged in this event, whether caused by the negligence of releases or otherwise, I hereby waive any claim I may have hereafter as a result of my participation in the Glow Walk/Run and in any other activities connected with this event in which I may voluntarily participate. I hereby agree to indemnify and hold harmless the releases from any loss, liability, damage or costs, including court costs and attorney fees me and my property which may occur as a result of my participation in the Glow Walk/Run.

I have read and understand the above statement. Please sign and date below. (If you are under 18 years of age, please have your parent or guardian sign below).

Signed _____

Printed Name _____

Date _____



Contact:

If you have any questions, please contact Lainey Sherwood at 828.398.8838 OR southernhapa@gmail.com.