



ST. JOSEPH
CATHOLIC SCHOOL

THE ST. JOE JOG

Proceeds go towards scholarships to help fund tuition assistance programs. If you would like to donate to the fund without participating in the JOG please complete below and return to the school or church office.

Registration Form

Date: Saturday May 11, 2019, 9:00 am

Location: Knights of Columbus, Shelbyville, Indiana

Cost: \$20.00 for adults, \$15.00 for students

Please complete one form per participant. Drop entry forms off at the school office with payment. Extra forms can be found online at www.sjsshelbyville.org. In order to receive a shirt, registration forms must be turned in by Thursday, April 18th. All people walking or running must register.

Name: _____

(Please check one) Adult _____ **Student** _____ **DONATION** _____

Shirt Size:

Adult: _____small _____medium _____large _____XL _____2XL _____3XL _____4XL

Youth: _____small _____medium _____large

Address: _____

Email Address: _____

I know that running or volunteering for this 5k is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained and, by my signature, I certify that I am medically able to perform in this event and that I am in good health while being properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I understand that the course is not closed to traffic. I assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or roller blades, and animals are not allowed. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive St. Joseph School from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Participant signature: _____

Guardian's Signature (if under 18):
