



## Town of Greece 5K Freedom Run Entry Form

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_

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Street Address \_\_\_\_\_

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City, State \_\_\_\_\_ Zip \_\_\_\_\_

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Email \_\_\_\_\_ Phone \_\_\_\_\_

Please Circle:                    M   F

Please Circle Shirt Size:      S   M   L   XL   XXL

Date of Birth: \_\_\_\_\_

Please Make \$25 Checks Payable To: Town of Greece 5K

Mail Registration To: Town of Greece  
                                  c/o Michelle Marini  
                                  1 Vince Tofany Blvd.  
                                  Greece, NY 14612

### Release of Liability

I know that participating in this walk/run is potentially hazardous. I should not enter unless I am medically able and properly trained. I also assume any and all risks associated with this event including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, and the condition of the roads and traffic, all such risks being known and appreciated by me.

Knowing these facts, and in consideration of your accepting my entry, I hereby, for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge the Town of Greece and/or any agents authorized by them for any purpose.

This release and waiver extends to all claims of every kind or nature, whatsoever, foreseen or unforeseen, known or unknown.

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Signature (Parent or guardian required if under 18) \_\_\_\_\_ Date \_\_\_\_\_