

**2009 Spring Half Program and Couch to 5K  
Sign Up Sheet**

Name
E-Mail
Shirt Size
Home Phone
Cell Phone
Address
5K ___ August Half _____
\$65 for 12 Week program Rock N Roll Half
\$35 for 7 Week program Beanie Baby 5K
Chicago Marathon Goal: Yes ___ or No ___
<b>(Program cost does not include race entry fees)</b>
Previous racing history
<b>Half marathon time _____ 5K time _____</b>

**Dick Pond-Elmhurst RELEASE WAIVER:**

I know training for a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including but not limited to: falls, contact with other participants, the effects of weather, including high heat and humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skate boards, baby joggers, roller skates or blades, animals and radio headsets are not allowed in the race and I will abide by these guidelines. 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 and release, Dick Pond Athletic Elmhurst, IL, Jayne Aspan and all other sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the person named in this waiver. I also agree that I may be examined and treated if necessary during the course of the race by qualified personnel in the event medical problems of any cause arise. The qualified personnel have the right to remove me from this program if, in their opinion, I may be suffering from a life threatening condition.

SIGNATURE (Parent if under 18 years of age)

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