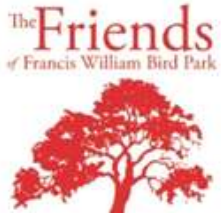


4th ANNUAL



Bird Park Trail Run 4 Miler

Kids 1/2 Mile Fun Run



Sat, Nov 5, 2016

Race Start 9:30 AM (Kids Fun Run 9:00am)

Registration Start 8:00 AM

Name (print): _____

Address: _____

City: _____

State: _____ Zip Code: _____

Male____ Female____ Age (on race day) ____ Grade____ (for fun run participants only)

EMAIL _____

Make checks payable to “Friends of Bird Park” (“Trail Race” on memo line)

Mail to: Friends of Bird Park
Jim Logan
10 Thornell Ave
East Walpole, MA 02032
339-364-0250

\$25.00 pre entry (until Nov 1)

\$30.00 post entry

\$5.00 Children’s “Fun Run”

REGISTER ONLINE <https://g2racereg.webconnex.com/birdpark4m2016>

<https://www.facebook.com/friendsofbirdpark>

<http://www.thetrustees.org/places-to-visit/greater-boston/bird-park.html>

PLEASE SIGN WAIVER ON OTHER SIDE

Liability Waiver

(Please read this entire document before signing)

As a participant in the **Bird Park Trail Run** (the "Program") run by the Trustees of Reservations (the "Trustees"), I expressly, willingly and voluntarily assume all risks and liability for any injuries to myself or others arising out of the Program. I recognize the potential for injury inherent in participating in outdoor activities, and agree to take all necessary precautions in the course of the Program. I assume responsibility for my own safety and that of others affected by my actions.

By signing this contract, I agree for myself, my representatives, agents, heirs, successors and assigns to release and hold harmless the Trustees and all of its affiliates, officers, agents, and employees from all claims, actions, causes of action, liability, loss, damage, controversies, accidents and injuries, and any expense, which in any way may arise from my participation in the Program and/or through any act or omission of the Trustees or any of its officers, agents, or employees. This General Release is intended to include any claims that I may have arising from personal injuries or other accidents and injuries caused by another Program participant. Additionally, by signing this contract, I agree to indemnify and hold harmless the Trustees for any claims, accidents and injuries that are caused by me.

I have read and reviewed carefully the Program information provided and also the terms of this contract. By signing below, I understand this document constitutes a legally binding contract, to be construed under Massachusetts law and under which both parties agree to be bound.

Signature _____

Print Name _____

Date _____

MINORS: IF UNDER 18 – SIGNATURE OF PARENT OR GUARDIAN (required)

The undersigned, _____, hereby certifies, warrants and represents that I am the legal parent or guardian of _____, the signer of the above release and that after fully informing myself regarding the nature and

risks of the event, I give my permission for participant to participate in the same and by my signature below I fully ratify, accept and agree to all of the terms of the above release both for myself individually and as legal parent or guardian of the participant.

Signature: _____ Relationship to minor: _____