



Swarthmore Charity Fun-Fair 5K Fun Run & Walk

**Proceeds to Benefit the Lions Charities
Race Supported by Swarthmore Rotary Club**

Date & Time	Sunday, April 19, 2009 12:00 noon start 10:30am –11:45am registration and race packet pick-up
Place	Swarthmore Train Station Chester Road, Swarthmore, PA 19081
Awards	First 3 male and female runners Age Group awards Awards Ceremony
Course	USA T & F Certified 5K through the streets of Swarthmore and the campus of Swarthmore College.
Amenities	T-shirts guaranteed to first 100 registrants. Live entertainment, food, and fun at Swarthmore Fun-Fair immediately after race
To enter	\$20.00 entry fee Make checks payable to: Lions Club of Swarthmore Fill in registration form Sign Release Form Mail registration and Release Form and check to: Lions Club of Swarthmore P.O. Box 514 Swarthmore, PA 19081
Information	James Ryan (267) 685-2517 or (215) 518-9387; email: Jdr17@aol.com Swarthmore Charity Fun-Fair web site: www.swarthmorefair.org www.runtheday.com

Swarthmore Fun-Fair 5K Registration Form
Proceeds Benefit Lions Charities
Race Supported by Swarthmore Rotary

Last Name _____ First Name _____ MI _____

Street Address _____ City _____

State _____ ZIP _____ Telephone _____

Sex M F Age Day of Race _____ T-shirt Size: No Shirt S M L XL

Run Walk (Please circle)

E-mail _____

Swarthmore Fun-Fair 5K Release Form

Name of Visitor Giving Release: _____

(provide names of entrant and parent or guardian if under 18)

VISITOR hereby releases, waives, discharges Swarthmore College, its agents and employees including board of managers, directors and officers, administration, faculty, staff and club members; Borough of Swarthmore, Lions Club of Swarthmore, Lions Club International (PARTY RELEASED) from all claims, including claims that VISITOR now has or may have in the future against the PARTY RELEASED. VISITOR also understands that its participation in the Swarthmore Fun-Fair 5K is undertaken on a completely volunteer basis. VISITOR makes this decision by choice and his/her participation is undertaken knowing that risks may be involved and VISITOR voluntarily assumes the risks of these dangers. VISITOR understands that the PARTY RELEASED does not assume any risk or liability due to any participation in this activity. VISITOR understands this release applies to all claims for property loss, injury or illness, or death or other damages suffered by him/her, now or in the future, whether suffered in transport to the activity or during the activity itself.

This release binds VISITOR, his/her heirs and personal representatives. VISITOR understands this release benefits the heirs, personal representatives, or successors and assigns of the PARTY RELEASED.

In the event VISITOR is a minor, the Release shall be executed by a legal guardian of the VISITOR, and shall be binding upon said parent or legal guardian as well as upon participating minor. Said parent or guardian, by execution hereof, waives all claims in their individual or derivative capacity, as well as claims on behalf of the VISITOR.

Before signing my name to this release, VISITOR states that:

- 1) I have read it
- 2) I understand it and know that I am giving up important rights
- 3) I sign it freely as my own act and deed
- 4) I intend to be legally bound by it
- 5) I certify that the VISITOR has been examined by a certified physician and is physically fit to enroll in the activity
- 6) I certify that VISITOR is covered by an independent health insurance policy

Insurance Carrier: _____

Insurance Policy Number: _____

Signature of Visitor: _____

Signature of Parent/Legal Guardian: _____

Printed Name of Parent/Legal Guardian: _____

Date: _____