

Race Across the Spectrum: 5K for Autism

Date: Saturday, July 14, 2012 @ 7:00 AM
Location: Crockett Park, Brentwood, TN
Address: 9025 Crockett Rd. Brentwood, TN 37027



Please Select One:

- \$25.00 Individual Adult Registration (until 6/15/12)
- \$30.00 Individual Adult Registration (from 6/16 to 7/12/12)
- \$15.00 Children 6-12 years
- \$5.00 Children 5 years old and under

- \$35.00 Team Captain/Team Formation
- \$23.00 Team Member (until 6/15/12)
- \$28.00 Team Member (from 6/16 to 7/12/12)

Please complete one application per individual and mail with your enclosed check to:
The Brown Center for Autism
2702 Greystone Rd.
Nashville, TN 37204
http://thebrowncenter.org/upcoming_events.php

Summary

Race Across the Spectrum is a 5K Run/Walk in support of research-based early intervention for young children impacted by Autism in Middle Tennessee. This run is dedicated to the 1 in 110 children and their families in Middle Tennessee who are affected by this disorder today.

Full Name _____ **Age:** _____ (as of 7/14/12)

D.O.B. ____ / ____ / ____ Sex: M ____ F ____ **Team Name** (if applicable) _____

T-shirt Size (select) Youth XL/Adult XS ____ Adult S ____ Adult M ____ Adult L ____

Adult XL ____ Adult XXL (\$5 extra) ____ *Additional Charge applies only to size XXL.*

Email Address _____

Emer.Contact _____ **Emer.Phone** _____ **Total Enclosed \$** _____

WAIVER AND RELEASE OF LIABILITY

1. In consideration for participating in *Race Across the Spectrum: 5K for Autism*, held on July 14, 2012, I hereby release, waive and discharge the Brown Center for Autism, their officers, volunteers, agents, and employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by negligence of the Brown Center for Autism, or otherwise, while participating in such event, or while in, on or upon the premises where the event is being conducted or in transportation to and from said premises.
2. To the best of my knowledge, I can fully participate in this event. I am fully aware of risks and hazards connected with the event ***I hereby elect to voluntarily participate in this event, and to enter the above-named event and engage in such activity knowing that the activity may be hazardous to me and my property.*** I voluntarily accept responsibility for damage or personal injury, including death, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an event.
3. I further hereby agree to indemnify and hold harmless the Brown Center for Autism and/or Brentwood Parks System from any loss, liability, damage or costs, due to my participation in said event, whether caused by negligence or otherwise.
4. I understand that the Brown Center for Autism or Brentwood Parks System will not be responsible for any medical costs associated with an injury I may sustain.

I acknowledge, affirm, and agree that I have had sufficient opportunity to read this entire WAIVER of my rights, that I understand its content, and that it is legally binding, and that I execute it freely, intelligently, and without duress of any kind and I agree to be bound by its terms. If participant is under 18 years of age, parent/guardian consent is required. I, as parent or guardian of the minor under 18 years of age referenced here hereby consent to the waiver and release of any and all claims as described in this RELEASE FORM.

Participant or Guardian Signature (if under 18) _____ Date _____

