Ladywood HIGH SCHOOL

BLAZE THE TRAIL

5K FUN RUN/WALK

Saturday, December 10, 2016

9 a.m.

Ladywood High School Grounds

ladywood.org/campus-life/blaze-trail-5k-fun-runwalk/

Blazing the Trail to a bright future!

Join us in blazing the trail to benefit the Ladywood High School Scholarship Fund! Proceeds help provide a pathway for well-rounded students to experience a bright future. Enjoy an exclusive route and beautiful scenery on the grounds behind Ladywood. Overall awards to top three male and female runners.

Grab friends and have some fun while supporting our future leaders! Visit ladywood.org/campus-life/blaze-trail-5k-fun-runwalk/ for more information, or email Dawn Conn at dconn@ladywood.org.

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Registration Form

Register via credit card online at ladywood.org/campus-life/blaze-trail-5k-fun-runwalk/ or use this form with cash or check. Completed form with check should be mailed to: Blazing the Trail Run/Walk, Ladywood High School 14680 Newburgh Rd, Livonia, MI 48154. Make check payable to Ladywood High School Run/Walk. Form must be received by Nov. 11, 2016. No refunds or transfers.

I want to: Run ____ Walk _____ Volunteer_____ Donate Only _____
Age on Race Day _____ Gender: MALE ____ FEMALE ____

First Name: _____ Last Name: _____
Address (include Apt. # if applicable): _____
City: _____ ST: _____ ZIP: _____
Email: _____ Phone (Area Code): _____
T-shirt size: S____ M____ L____ XL____ XXL_____
Are you a Ladywood Student? Y___ N____ Are you a Ladywood Alumna? Y___ N____

Registration Fees

On or before Nov. 11

$25 – (Adults 19 and up) $_____
$20 – (Students ages 13-18) $_____
$10 – (Young Students ages 6-12) $_____
Kids 5 and under: Free! $_____

After Nov. 12

$30 – (Adults 19 and up) $_____
$25 – (Students ages 13-18) $_____
$15 – (Young Students ages 6-12) $_____
Kids 5 and under: Free! $_____

I don't want to race but just want a T-shirt ($10 per shirt) No. of Shirts _____ $_____
I don't want to race but I'd like to donate to the scholarship fund $_____

Register on or before November 11; T-shirt guaranteed. Register after Nov. 12, rates increase by $5; T-shirts provided while supplies last. Online registration closes on December 8 at 11:59. Participants can register with paper form at packet pick-up on Dec. 9 or on race day Dec. 10 from 7 to 8:45 a.m. prior to the start of the race, cash or check only with paper forms. Kids 5 and under race free.

Legal Waiver:

I know that running 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 hereby certify that I am in good health and I have trained to run the distance of the race, which I am entering. 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/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry into this running race, I, for myself and anyone entitled to act on my behalf, waive and release the Ladywood High School., its officers, directors, agents, volunteers and employees, all states, cities, counties or other governmental bodies or locations in which events or segments of events are held, all 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 persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that bicycles, skateboards, roller skates or inline skates and animals are not allowed in the event and I will abide by this policy. I also understand that baby joggers are discouraged for the safety of all participants. I authorize any healthcare provider to release any and all information pertaining to my healthcare, medical condition and medical treatment as a result of my participation in this Ladywood High School event to Ladywood High School and its staff.

Participant's Name (Print): _____

Participant's Signature (or Parent/Guardian if under 18): _____