Keep the Faith 5k Trail Run/Walk for the Homeless

November 12, 2016





Run your socks off for the Homeless! November 12, 2016

Starting Time is 11:00 AM at Poor House Farm Park, Martinsburg, WV (registration day of event 10:00 AM) Entry Fee: Adult \$30.00, Children/Students thru college \$20.00, Family rate \$60.00 (We will have t-shirt & boxed lunch for you!) Please bring a pair of warm socks for the homeless.

The proceeds of this event will benefit the Good Samaritan Free Clinic and the WV Faith Community Coalition for the Homeless.

| What is your | T-Shirt size? | SmallMedium | LargeXL _ | XXL | |
|----------------|---------------|-------------|--------------|-----|---|
| Ma | ale Female | Adult | _Child | | |
| Registration I | nformation: | | | | |
| Name | | | | | _ |
| Mailing Addre | SS | | | | |
| Age | Email | | | | _ |
| Cell Number_ | | Emerg | ency Phone # | | |

Registration and Money to Good Samaritan Free Clinic **by OCTOBER 28, 2016**. (Please write Attn. to: Keep the Faith 5K)

Checks Payable to: WV Faith Community Coalition for the Homeless

Mail to: Good Samaritan Free Clinic, PO Box 2353, Martinsburg WV 25402

Please sign Waiver statement below for each participant and for a child under 18 years old

I, the undersigned, in consideration of acceptance of the entry and registration as participant in Keep the Faith 5K, waive any and all claims and rights which I and my heirs or assigns may now or hereafter have against The Good Samaritan Free Clinic, Faith Community Coalition for the Homeless, and all officials, volunteers, and sponsors of the Keep the Faith 5K Trail Run/Walk, and all additional groups or individuals associated with this race which may indirectly or directly result from my participation in the Keep the Faith 5K Run/Walk for any illness, including death, that may result directly or indirectly with participation in this event. I further warrant and represent that I am in proper physical condition to participate in the Keep the Faith 5k Run/Walk and am not participating in this event against physician's advice nor am I taking medications which would impair my health or ability to participate. I further acknowledge that I am responsible and agree to release, indemnify, and hold harmless the above mentioned parties for any and all medical expenses, treatment liability, damages, claims, costs or other costs arising from any bodily or personal injury sustained directly or indirectly in my participation in this event. I assume all risks associated with this event, including but not limited to falls, contact with other participants, effects of weather, trail conditions, all such risks being known and appreciated by me. I grant permission to all of the forgoing the right to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes.