

# THE HARVEY SCHOOL

## Waiver - Homecoming 5K Run / Walk Saturday, October 15, 2022

Participant's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Category: Adult \_\_\_\_\_ US \_\_\_\_\_ Under 14 \_\_\_\_\_ Gender: M \_\_\_\_\_ F \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Results: One winner will be awarded in each of the following categories: Adult (Male), Adult (Female), Upper School (Male) Student, Upper School (Female) Student, Under 14 (Male), Under 14 (Female)

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### WAIVER BELOW MUST BE COMPLETED PRIOR TO START OF RACE

#### For My Participation

In consideration of acceptance of this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims or damages which may accrue against The Harvey School and/or its directors and operators (including volunteers, vendors, sponsors and their representatives) for any and all injuries (personal injury, death or property) suffered by me, and assigns for any and all injuries suffered by me arising out of or related to said event, I attest and verify that I will participate in this event as a foot race entrant, that I am personally fit and that a licensed medical doctor has verified my physical condition. Further I hereby grant full permission to any and all of the foregoing released persons to use photographs, videotapes, motion pictures, recording or any other record of my participation in this event for any legitimate purpose.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Parents, be sure to sign the waiver below, Your child will not be allowed to enter the race if you do not sign.

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, for my child (named below) and for my and my child's heirs, executors and administrators, waive and release any and all rights and claims or damages which I may accrue against The Harvey School and/or its directors and operators (including volunteers, vendors, sponsors and their representatives) for any and all injuries (personal injury, death or property) suffered by my child or by me, arising out of or related to said event, I attest and verify that my child will participate in this event as a foot race entrant, that my child is physically fit and that a licensed medical doctor has verified my child's physical condition. Further I hereby grant full permission to any and all of the foregoing released persons to use photographs, videotapes, motion pictures, recording or any other record of my child's participation in this event for any legitimate purpose.

Parent Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Return to Athletic Office, The Harvey School, 260 Jay Street, Katonah, NY 10536 or drop off at the registration desk before the start of race. For questions, you can contact Denise Smith at [dsmith@harveyschool.org](mailto:dsmith@harveyschool.org) or 914-232-3161 ext. 121, or Christian Coscio at [ccoscio@harveyschool.org](mailto:ccoscio@harveyschool.org).