Girls on the Run- Union County Health Form

Allergies / Medications:

Does Participant have any allergies: ☐ Yes ☐ No (please list any/all allergies participant has experienced):
Does Participant take medications: ☐ Yes ☐ No (please list any/all medications participant is currently taking, including inhalers.
Any additional special mental, physical or medical information?

Insurance Information:

Is Participant covered by insurance? ☐ Yes ☐ No Carrier/Plan Name: _____

Name of Insured: _____ Group #: _____

Relationship to Participant: _____ Policy #: _____

Pick Up Procedures / Authorized Individuals:

How should your child be released from Girls on the Run? (Select one): ☐ Picked up by Parent/Guardian or Authorized Individual

☐ Attending school (AM teams) or an on-site after school program (PM teams) ☐ Walking or riding a bicycle

☐ Other Transportation (include transportation name in list of Authorized Individuals, below)

Please list the names of individuals authorized to pick up your child. Include phone numbers for the people to be contacted if parents/guardians or secondary contacts cannot be reached.

1) Name: _____ **Phone:** _____

2) Name: _____ **Phone:** _____

3) Name: _____ **Phone:** _____

I am the parent or legal guardian of _____, a minor ("Participant"). I agree that the Participant may participate in the Girls on the Run program. The purpose of the program is to increase the Participant's activity/fitness level and self-esteem while at the same time teaching life skills that will be beneficial to the Participant as she enters middle school/adolescence. I understand that during the program, the Participant will be involved in outdoor physical activities. Physical reactions to exercise may include heat-related illness, abnormal heartbeats and blood pressure and, in rare instances, events such as heart attacks. While Girls on the Run takes all reasonable precautions, we can make no guarantees regarding these and other risks. Recognizing the risks of the program, and in consideration for allowing the Participant to participate in the program, I hereby release, discharge and agree to hold harmless, and to indemnify each of Girls on the Run of Union County and Girls on the Run International, their owners, directors, officers, contributors, sponsors, employees, contractors, agents and assigns (together or individually, "Girls on the Run," whichever the case may be) against and from any causes of action, claims, demands, damages, costs, loss of services, expenses, compensation, all consequential damages and attorneys' fees (regardless whether pursuant to the laws of any county, state or country) claimed by, through or on behalf of me or the Participant related directly or indirectly to the program (including without limitation the 5k race), and specifically including any and all claims for personal injuries sustained while participating in program activities without regard to negligence or negligent conditions. In addition, I hereby authorize Girls on the Run of Union County, if after a reasonable attempt has been made to reach a parent, guardian or emergency contact to obtain consent, or if sound medical practice decrees that there is not time to make such an attempt, to consent to any x-ray examination, anesthetic, dental, medical or surgical diagnosis or treatment, and hospital care, to be rendered to the Participant under the general or special supervision and on the advice of any physician or surgeon who may treat the Participant, and consent to any x-ray examination, anesthetic, dental, medical or surgical diagnosis or treatment and hospital care, to be rendered to the Participant by any health care professional who may treat the Participant. I agree to pay for any such treatment and/or reimburse Girls on the Run in full for all costs and expenses it may incur arising out of or relating to such treatment, regardless of Participant's healthcare insurance coverage, or lack thereof.

I hereby grant to Girls on the Run the absolute and irrevocable right and permission, in respect of the photographs and videos that have been or will be taken of the Participant or in which the Participant may be included with others, to copyright the same, in the name of Girls on the Run or otherwise; to use, re-use, publish, and republish the same in whole or in part, individually or in conjunction with other photographs and videos, and in conjunction with any printed matter, in any and all media now or hereafter known, and for any purpose whatsoever; and to use my and or Participant's name in connection therewith. I hereby release and discharge Girls on the Run from any and all claims and demands arising out of or in connection with the use of the photographs and videos, including without limitation any and all claims for libel or invasion of privacy.

I expressly agree that this consent and release of liability is intended to be as broad and inclusive as permitted by applicable law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I hereby warrant and represent that I am 18 years old or older; I have carefully read this consent and agree to its terms and conditions, that before signing this agreement I had the chance to ask questions; and I am aware that by signing this consent, I assume all risks and waive and release certain substantial rights that I and Participant may have or possess against Girls on the Run. To the extent permitted by applicable law, I hereby irrevocably and unconditionally waive trial by jury in any legal action or proceeding related to this agreement. I have fully read the above consent and releases, understand them, and I voluntarily, knowingly and expressly agree to them. I hereby certify that there are no contraindications to the Participant's participation in the Girls on the Run program. I am the parent or legal guardian of the Participant, and this permission and release is binding on me and my executor, administrators and heirs.

Guardian responsible for transportation of participant. I have read, understand, and agree with GOTR's Pick-Up and Release Policy - Guardian Communication. Specifically, I agree that I am responsible for arranging/providing for the Participant's transportation to and from all GOTR lessons and events in accordance with the terms of GOTR's Pick-Up and Release Policy - Guardian Communication.

Participant's Name (please print): _____ Date: _____

Signed by Parent or Guardian: _____Date: _____

Continue to PAGE 2

Parent/Guardian Program and 5K Consent Form

Girls on the Run of Union County 5K Waiver

In consideration of my application being accepted, I accept any risks of participation in the run and agree to hold harmless the Lake Park Community, all sponsors, all officers, and members of said organizations, their respective employees, agents, and any other individuals who are in any way associated with this event, including volunteers assisting with traffic on the course. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event.

I understand that participating in this event is potentially hazardous, and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effect of weather, traffic and conditions of the road. I, for myself and my heirs and executors, hereby waive, release and forever discharge the event organizers, sponsors, promoters and each of their agents, representatives, successors and assigns, and all other persons associated with the event, for all liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise. I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event.

_____ _____

Date Signature of parent/guardians