



# Mansion Run 5k

**All race-day registrations: \$20**

**(Make checks payable to Salve Regina University)**

FIRST NAME: \_\_\_\_\_

LAST NAME: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

AGE: \_\_\_\_\_ GENDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Waiver:**

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the event and sponsors, coordinating groups and any individuals associated with the event, their representatives and assigns, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Further, I hereby grant full permission to any and all of the foregoing to use my likeness in all media including photographs, pictures, recordings or any other record of this event for any legitimate purpose.

---

SIGNATURE

DATE