## Earth Day Celebration Fun Run 2016

## INFORMATION

Name of Parent or Guardian:					
arent's E-mail: Parent's Tele			elephone: (H) (V	V) (Cell):	
Address:					
City, State, Zip:					
Insurance Carrier and Policy No:					
Emergency contact information – if th	e Parent or Gu	uardian named above is not ava	ailable in an en	nergency, please notify:	
Name:					
Relationship:		Telephone: (H) (W) (Cell):			
Name of Participating Child/Children:					
Do any of your children participating					_
[] Asthma [] Allergies [] Cancer [] Diabe	etes [] Epilepsy	[] Heart disease [] Hemophilia			
[] High blood pressure [] Leukemia []	Other:				
Name of Applicable Child/Children:			-		
Allergies (check all that apply):					
[] Bee stings [] Medication(s):	[] Food(	s):[] Other	r:		
Comments/Instructions:					
Name of Applicable Child/Children:					
INTRODUCTION Please read this entire Acknowledgment an guardian/legal guardian (hereafter collectively "participant", "minor" or "child') must sign this Fochild is under 18 years of age. I acknowledge	referred to in this orm. I acknowledg	Form as "parent" or "I") of the minor ge that the participant is my child, that I	r participant (mino	ors are those under 18 yrs. of	age; hereafter sometimes
ACKNOWLEDGMENT AND ASSUMPTION OF I recognize and acknowledge that there are cer any and all injuries, damages or loss, regardless	tain risks of physi	cal injury to participants in the Earth D may sustain as a result of said particip	ayFun Run, and I pation.	voluntarily and knowingly agree	e to assume the full risk o
SIGNATURE OF PARENT/GUARDIAN OF MIN	OR PARTICIPANT	DATE	PRINTED NAME	OF PARENT/GUARDIAN	
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPAN		PARTICIPANT'S AGE AND B	IRTHDATE
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPAN	 JT	PARTICIPANT'S AGE AND B	IRTHDATE
PARTICIPANT SIGNATURE	DATE	PRINTED NAME OF PARTICIPAN	 IT	PARTICIPANT'S AGE AND B	IRTHDATE

Send application to & \$5: Earth Day Fun Run c/o Sharon Bosley 419 S.14<sup>th</sup> St Coeur d' Alene, ID 83814