

# STUDENT DISCOUNT REGISTRATION



## MAY 5-6, 2012

Mail completed forms and payment to:  
Festival Foods La Crosse Fitness Festival  
400 La Crosse Street, La Crosse, WI 54601

For more information visit: [www.LaCrosseFitnessFestival.com](http://www.LaCrosseFitnessFestival.com)

### CANCELLATION/EVENT CHANGE POLICY

The entry fee is non-refundable or non-transferable to next year's event. Participants are able to transfer races using the "Race Change Request Form" found on the Festival Foods La Crosse Fitness Festival website. The participant will be expected to pay a \$10 administrative fee for switching events, in addition to the difference between entry fee prices.

### ADDITIONAL INFORMATION:

- Must have proof of a valid student ID/affiliation to be eligible for discount.
  - ◊ Walk in registration can show ID
  - ◊ Mail in registration need to provide copy of ID
- Participants must volunteer for 3 hours to receive discounted race fee
- A 6.5 hour time limit will be in effect for the marathon and a 4 hour time limit will be in effect for the half marathon
- Entrants in the 5K Walk may use baby strollers or joggers but will be expected to be considerate of other participants on the course. Baby strollers and joggers are NOT permitted in the 5K run, marathon, half marathon or marathon relay
- Rollerblades, skateboards, bicycles, tricycles and similar devices may NOT be used in any of the listed events

### WAIVER AND RELEASE

BEFORE SIGNING THIS WAIVER OF LIABILITY, READ THIS ENTIRE DOCUMENT VERY CAREFULLY. IF AN ACCIDENT WERE TO OCCUR, THEN YOU WOULD BE GIVING UP LEGAL RIGHTS THAT YOU MIGHT OTHERWISE HAVE BY SIGNING THIS WAIVER OF LIABILITY. IF YOU DO NOT UNDERSTAND ANYTHING IN THIS DOCUMENT, OR IF YOU OBJECT TO ANY PROVISION CONTAINED IN THIS DOCUMENT, YOU SHOULD NOT SIGN THIS DOCUMENT AS IT IS DRAFTED, BUT RATHER SEEK ADVICE FROM YOUR LEGAL COUNSEL. REQUESTS FOR MODIFICATIONS MAY BE DIRECTED TO THE CITY ATTORNEY'S OFFICE AT 608.789.7511 WEEKDAYS BETWEEN 8:30 AM - 5:00 PM. The City of La Crosse is hosting the Festival Foods La Crosse Fitness Festival, a two-day event to be held on May 5 and May 6, 2012. The activities available to participants include a 26.2 Mile Marathon, Marathon Relay, Half-Marathon, 5K Run or 5K Walk, Cycling Time Trial, Cycling Criterium, Bicycle Tour and Children's Events; consisting of a 100 Yard Run/Walk, 400 Yard Run/Walk and an 800 Yard Run/Walk, all of which are collectively referred to as the "Run/Walk/Bike Events." By signing this Waiver of Liability, I understand that any Run/Walk/Bike Events in the City of La Crosse as part of the Festival Foods La Crosse Fitness Festival have inherent risks associated with it, which could result in harm and/or losses to myself or my child(ren) whether or not known or readily foreseeable at this time, and which might result not only from my own act, omission or negligence, and/or that of my child(ren), but also from the actions, inactions or negligence of others, or the condition of the premises or equipment used. While participating in any Run/Walk/Bike Events, it is in the best interest of the participants to exercise due care, safety and common sense for themselves and others. No accident or other insurance is provided through the City of La Crosse. I also hereby give permission for images of myself, my child(ren), captured during the Festival Foods La Crosse Fitness Festival through video, photo and digital camera, to be used solely for the purposes of event promotional material and publications, and waive any rights of compensation or ownership thereto. By signing this Waiver of Liability, I fully accept all such risks of any injury, damage or loss regardless of severity that may be sustained to myself or my child(ren) and all responsibility for losses, costs and damages incurred in any and all activities connected with or associated with the Run/Walk/Bike Events in the City of La Crosse as part of the Festival Foods La Crosse Fitness Festival on May 5-6, 2012. By signing this Waiver of Liability, I agree to waive, relinquish, discharge, release and covenant not to sue the City of La Crosse, Wisconsin, its officers, employees and agents from all claims of injury, damage, or loss that may accrue arising out of, connected with, or in any way associated with the Run/Walk/Bike Events in the City of La Crosse as part of the Festival Foods La Crosse Fitness Festival as identified in this Waiver of Liability. This waiver of liability does not apply to intentional misconduct of the City of La Crosse. I have read this Waiver of Liability thoroughly and fully understand it and enter into it on behalf of myself, my heirs, next of kin, assigns, and personal representatives. No one has made to me any representations, statements, or inducements that change or modify anything written in this agreement.

### PERSONAL INFORMATION

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on race day: \_\_\_\_\_ Gender: \_\_\_\_Female \_\_\_\_Male

Phone: \_\_\_\_\_ Are you a wheelchair athlete? \_\_\_\_ Yes \_\_\_\_ No

Email: \_\_\_\_\_ (used to send registration confirmation)

T-Shirt Size: \_\_\_\_X-Small \_\_\_\_Small \_\_\_\_Medium \_\_\_\_Large \_\_\_\_X-Large \_\_\_\_XX-Large (shirts are unisex size)

If competing in the Corporate Challenge, what is your place of employment? \_\_\_\_\_

### PAYMENT METHOD

Checks Payable to: La Crosse Fitness Festival

Amount: \_\_\_\_\_

Credit Card: \_\_\_\_Visa \_\_\_\_Mastercard \_\_\_\_Discover

Card No: \_\_\_\_\_

Expiration: \_\_\_\_\_

Signature: \_\_\_\_\_

RACE ENTRY \_\_\_\_ Marathon- \$55 \_\_\_\_ Half Marathon- \$45 \_\_\_\_ 5K Run- \$15 \_\_\_\_ 5K Walk- \$10

Individual Waiver Signature

Date

If under 18 yrs of age, parent or guardian must sign here