

**PROCEEDS WILL BENEFIT THE
JOSH GEORGE MEMORIAL FUND!**



ENTRY FEE:

****The first 100 runners to register will receive a tie-dyed
RACE T-SHIRT!!**

**\$15.00 High school students and faculty (all area high
schools)**

\$25.00 Community pre-registered participants

\$30.00 Race day registration

****Make checks payable to the Josh George Memorial
Fund. Additional donations are wonderful!!**

**Mail Entry Form and Fees to:
Brittany Fulton
6 Lawson's Pond Court
Bluffton, SC 29910**

Cut Here. Mail in Right Portion with Fee-----

NAME: _____
STUDENT/FACULTY? If so, where? _____
ADDRESS: _____

PHONE: _____

EMAIL: _____

MALE/FEMALE: _____

SHIRT SIZE: (circle one) S M L XL

EVENT RELEASE FORM

ATHLETE: _____ (PRINT NAME)

IN CONSIDERATION FOR THE ABOVE ATHLETE TO PARTICIPATE IN THE RACE FOR JOSH, I AGREE TO INDEMNIFY, WAIVE, OR RELEASE PROPERTY OWNERS WHERE THE EVENT IS HELD, COACHING STAFF, VOLUNTEERS, AND SCHOOL DISTRICT FOR ANY INJURIES DAMAGES OR LOSSES TO PERSONS OR PROPERTY, INCLUDING MYSELF AND MY CHILD, WHICH MAY BE SUSTAINED IN WHOLE OR IN PART, DIRECTLY OR INDIRECTLY IN CONNECTION WITH MY CHILD'S/SELF PARTICIPATION IN THE EVENT. I UNDERSTAND AND ACCEPT RACING IS A RIGOROUS AND INHERENTLY DANGEROUS ACTIVITY IN WHICH INJURIES REGULARLY OCCUR. MY CHILD/SELF IS IN GOOD PHYSICAL CONDITION AND IS ABLE TO SAFELY PARTICIPATE IN THE EVENT, AND, IS PARTICIPATING IN THE EVENT FREELY AND VOLUNTARILY WITH MY KNOWLEDGE AND CONSENT, KNOWING FULLY THE RISKS ASSOCIATED WITH SUCH ACTIVITIES, ASSUMING SAID RISKS.

STUDENT: _____

PARENT/GUARDIAN: _____

DATE: _____

**Questions?
Please contact Brittany Fulton at
bfulton91@msn.com or call
843 540 4317.**

