

NATIONHOUSE Race for the Race Registration

Participant Name (le	gal name): _					
Sex: □ Female □ Male Birthdate:			Age on race date:			
Address:						
City:				State	Zip Co	de
Phone number (best contact):			Email Address:			
'Emergency Contact Name 1:		Number:				
*Emergency Contact Name 2:		Number:				
*Please make sure this person	knows to be "on ca	all" during the time of the I	Race for th	e Race. This person should	I not be racing with you o	r in a race of their own.
TYPE OF ENTRY ☐ Individual - Must be postmarked by April 14 th , 2014 for early prices ☐ Team/Family Participant - Please give signed form and payment to your Team Captain Team/Family Name:			ENTRY FEE Adult Run/Walk Reg. Fee\$ 30 (after April 14 th \$40) Student (must bring ID)\$ 20 (after April 14 th \$30) Child (age 10 – 17)\$ 20 (after April 14 th \$30) Child (under 10) FREE with no shirt (\$12 for t-shirt) Race for the Race at Home\$ 30 *(t-shirt mailed after Race)			
ream/ramily Name:_				-	· · · · · · · · · · · · · · · · · · ·	,
ENTRY CATEGORY (ch ☐ 5K Run/Walk ☐ Race from Home	eck one)			tax deductible don	ED \$ Mail Check	_
					Wash	ington, DC 20019
T-SHIRT SIZE: *(Race Fo larger.) □ Youth Small □ Adult Small		lium ☐ Youth I	Large		-	
Additional Tee shirts(\$12per shirt):		_				
Team/Family Name						

^{*}All participants will be required to sign a waiver to participate in the Race for the Race. Please read and bring a signed copy with you to the Race for the Race. We will add all participants to the NationHouse and Nich email list to keep you aware of Race for the Race updates and future events.



NATIONHOUSE Race for the Race Waiver

WAIVER: (MUST BE SIGNED)

ALL PARTICIPANTS IN THE RACE FOR THE RACE EVENT ("The Race") ARE REQUIRED TO, AND HEREBY DO. ASSUME ALL RISK FOR PARTICIPATION IN THE RACE BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT: The undersigned athlete ("Athlete") on behalf of himself/herself and behalf of Athlete's personal representatives, assigns, heirs, executors and successors hereby fully and forever releases, waives, discharges and covenants not to sue The Race or The Race organizers, including but not limited to, NationHouse Positive Action Center, Watoto School, NationHouse Enterprises LLC, Nich Arts, Ankobea, the boards of directors of these organizations and any and all municipal agencies whose property and/or personnel are used or in any way assist with The Race, all sponsoring or co-sponsoring companies or individuals related to The Race, together with their officers, directors, shareholders, successors and assigns, (collectively "Releasees") from all liability to the Athlete and his/her personal representatives, assigns, heirs, executors and successors for any and all loss(es), damage(s) and any and all claims or demands therefore, on account of injury to Athlete, his/her property or resultant death, whether caused by the active or passive negligence of all or any of the Releasees or otherwise, in connection with the Athlete's participation in The Race. Athlete represents and warrants that he/she is in good physical condition and is able to safely participate in The Race. Athlete is fully aware of the risks and hazards inherent in participation in The Race and hereby elects to voluntarily participate knowing the risks associated with The Race. Athlete agrees to indemnify and hold harmless each of the Releasees from and against any and all damages, costs or claims, including reasonable attorneys' fees, made by any third party due to or arising from or relating to the participation of Athlete in The Race or the violation of this Agreement. Athlete hereby assumes all risks of loss(es), damage(s), or injury(ies) that may be sustained by him/her while participating in The Race. Athlete agrees to the use of his/her name and photograph in broadcasts, newspapers, brochures and other media without compensation. Athlete acknowledges that the entry fee paid is non-refundable and non-transferrable. Athlete acknowledges and agrees that the NationHouse Positive Action Center, Watoto School, NationHouse Enterprises, LLC, (the "Organizers") in their sole discretion may delay or cancel The Race if it believes the conditions on race day are unsafe. In the event The Race is delayed or cancelled for any reason, including but not limited to: fire, insurrecting war, public disaster, flood, unavoidable casualty, acts of God or the elements (including without limitation, rain, hail, hurricane, tornado, earthquake), or any other cause beyond the control of the organizers, there shall be no refund of the entry fee or any other costs of the Athlete in connection with The Race. The athlete hereby grants the medical director of The Race, and his/her agents, affiliates and designees, access to all medical records (and physicians) as needed and authorizes medical treatment as needed. Athlete understands that they have the right to refuse medical care and advice of Race medical directors and representatives; if Athlete's medical condition becomes such that the Athlete's mental capacity is questioned, the physician has the right to recommend and initiate treatment for the Athlete. It is understood and agreed that Athlete hereby assumes liability for any and all medical expenses incurred as a result of training for and/or participation in The Race, including but not limited to, ambulance transport, hospital stays, physician and pharmaceutical goods and services. Athlete warrants that all statements made herein are true and correct and understands that Releasees have relied on them in allowing Athlete to participate in The Race. ATHLETE HAS READ THE FOREGOING AND AFTER CAREFUL CONSIDERATION, INTENTIONALLY AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT.

IF ATHLETE IS UNDER AGE 18 OR AN INCAPACITATED ADULT HIS/HER PARENT OR GUARDIAN MUST SIGN THE RELEASE AND WAIVER AGREEMENT. Athlete's Parent or Guardian's Signature above certifies that my son/daughter/ward has my permission to participate in The Race. Athlete's Parent/Guardian has read and understands the foregoing RELEASE WAIVER OF LIABILITY AGREEMENT (above) and by signing intentionally and voluntarily agrees to its terms and conditions. Athlete's Parent/Guardian further certifies that my son/daughter/ward is in good physical condition and is able to safely participate in The Race. I hereby authorize medical treatment on him/her and grant access to my child's medical records as necessary and as stated above.

Participant Signature:	Date: