

Beat the Odds Women's Race Against Cancer



Juneau Trail and Road Runners is an affiliate member of the Road Runners Club of America.

Race Date:	Saturday September 05 1998
Start Time: 0	9:00AM (Registration 08:15AM)
Location:	Mendenhall River School
Race Contact:	Merry Ellefson
join JTRR https://southeastroadrunners.org/ re Course Description: A race for the cure for breast cancer. Men, you ca	esults online: https://jtrr.org/event/1998/race/562 an participate too (see the next entry).
	RY FORM ENTRY FEES
□5k (5 km)	Kids 18 & Under - \$0
•	NSORED BY Adults Day of Race - \$0
	and Road Runners
Last Name	First Name
GENDER CIRCLE ONE (Male Female Non-Binary	
email	JTRR MEMBER: (YES NO) (if yes, skip phone,address)
MAILING ADDRESS	
STREET OR BOX	
СПҮ	PHONE
STATE	ZIP
this waiver. In addition, I acknowledge the contagious nature of communicable disease	dous activity which could cause injury or death. I will not enter and participate unless I am medically able and properly in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my cipation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume dt ot: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, summe all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and bicycles, skateboards, roller skates or initine skates, animals, and personal music players are not allowed in the race, a baby jogger or stroller, I also accept the responsibility for rijury up to death of the child being transported in the on of your accepting my entry I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail vand Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and his event, even though that Ilability may arise out of negligence or carelessness on the part of the persons named in es and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion er stand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent
	BIB NUMBER:
SIGNATURE	(for race officials only)
SIGNATURE of parent or guardian if u	nder 18 DATE