

Race Date:

Alaska MS Walk/Run

Saturday April 17 2004

Start Time:	10:00AM (Registration 09:15AM)
Location:	Brotherhood Bridge Parking Lot
Race Contact:	Peggy Ann McConnochie 789-2181
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/event/2004/race/653
Course Description:	
	ggyann@gci.net The two mile walk is on the Brotherhood Bridge rsity and back to the parking lot All proceeds from this race will
Distance □ 2 mile walk (2 miles) □ 5k run (5 km) □ volunteer - \$0	RY FORM ENTRY FEES Kids 18 & Under - \$0 Adults Day of Race - \$0
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Last Name	_ First Name
GENDER CIRCLE ONE (Male Female Non-Binary)	Age on 7/1/2004
email	JTRR MEMBER: (YES NO) (if yes, skip phone,address)
MAILING ADDRESS	
STREET OR BOX	
СПҮ	PHONE
STATE	ZIP
trained, and by my signature, I certify that I am medically able to perform this event, am in go participation in this event, including the right of any official to deny or suspend my participatic all risks associated with running or volunteering in this event, including but not limited to: f volunteers, race personnel, contract service providers, employees, and spectators. I assume the conditions of the road and/or trail including surrounding terrain. I understand that bicycle and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a bat jogger or stroller. Having read this waiver and knowing these facts and inconsideration of y and Road Runners, the United States Forest Service, the state of Alaska, the City and successors from all claims or liabilities of any kind arising out of my participation in this ew this waiver. In addition, I acknowledge the contagious nature of communicable diseases and this event. I acknowledge that such exposure or infection may result in personal injury illnes	ctivity which could cause injury or death. I will not enter and participate unless I am medically able and properly od health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my no for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume alls, physical contact with and/or the potential contraction of a communicable disease from other participants, all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and as, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, by jogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the bour accepting my entry I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and ent, even though that liability may arise out of negligence or carelessness on the part of the persons named in doluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in s, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion id 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 und	er 18 DATE