



Hosted by Steubenville Parks and Recreation, the Jefferson County General Health District and supported by The Friends of Beatty Park, this race will be run on two nature trails - the Purple and Red trails at Historic Beatty Park. It will include dirt trails in wooded areas with small bridges, a creek crossing, as well as a few small natural obstacles. The race will include up hill areas and a short loop in the adjacent historical Union Cemetery.

Registration
 Register online at <https://runsignup.com/Race/OH/Steubenville/DinoDashBeattyPark5ktrailrunandwalk>
 or complete and return this form along with fee to the Martin Luther King Recreation Center. Race day registration begins at 7:30am

Fee
 5 K run and Walk \$20.00
 Tot Trot Free
 5K starts at 9am
 Last day to register and guarantee a t-shirt is June 3rd
 Tot Trot participants will receive a medal.

Start times
 Tot Trot 8:45am
 5K Run and Walk 9:00am

Complete this form and return it along with registration fee to: Lori Fetherof, Martian Luther King Recreation Center, 905 Market St, Steubenville, Ohio 43952

Name _____

Address _____ City _____

Phone _____ Birthdate _____

Shirt Size (circle one) Youth small YS YM YL AS AM AL AXL

I am signing up for (circle one) 5K Run 5K Walk Kids Tot Trot

Email Address (for communication purposes only) _____

Emergency Contact Name _____ Phone _____

Adult Signature _____ Date _____

FOR OFFICE USE ONLY

Total amount due _____ Amount Paid _____ Payment type _____ cash _____ check # _____

Staff signature _____ Date _____

Please read and sign waiver on back

AGREEMENT TO PARTICIPATE AND WAIVER AND RELEASE

The undersigned, _____, in consideration of the privilege to participate in the program known as _____ do hereby covenant and agree with the City of Steubenville and the Jefferson County Health Department as a result of any injuries which may occur to me as a result of my participation in the above-referenced activity. I understand that the activity in which I am going to participate may or could result in bodily injury, damage to my person and/or death. On behalf of myself, my heirs, assigns and next of kin, I waive all claims for damages, injuries and death sustained to me that I may have against the City of Steubenville as it relates to my participation in the above-referenced activity.

I further agree that this release and covenant is binding upon me and shall extend to my heirs, executors, administrators, successors, and assigns and that no action or claim shall be filed by any of them for their own behalf or on behalf of my estate as a result of my participation in the above referenced program.

I have read, understand and fully agree to the terms of this WAIVER AND RELEASE. I understand and confirm that by signing this WAIVER AND RELEASE I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law. I am 18 year of age or older and mentally competent to enter into this waiver.

IN WITNESS WHEREOF, I have hereunto subscribed my name to this Waiver and Release on this _____ day of _____, 2023.

IF PARTICIPANT IS A MINOR:

Printed Name of Participant

Printed Name of Minor

Signature of Participant

Signature of Parent\Guardian\Legal Custodian\Responsible Adult

Address

Printed Name of Parent\Guardian\Legal Custodian\Responsible Adult