



SATURDAY • APRIL 8, 2017

Check-in: 7:00 AM | Race Start: 8:00 AM

3.4 Mile Run/Walk or 1 Mile "Pit Road" Walk

at Watkins Glen International, 2790 County Route 16, Watkins Glen

All proceeds benefit The Arc of Schuyler, a non-profit organization providing supports to people with intellectual and developmental disabilities, including autism.

REGISTER ONLINE at www.ArcGrandPrixRun.org

INFO: 607.535.6934 - THIS IS A RAIN OR SHINE EVENT!

PARTICIPANT INFORMATION

(Complete a separate form for each participant)

FIRST NAME _____ LAST NAME _____

STREET ADDRESS _____

CITY _____ ST _____ ZIP _____

PHONE _____

EMAIL _____

DATE OF BIRTH: MO/DY/YR _____ CHECK ONE: GENDER: Male Female

TEAM NAME (OPTIONAL) _____

CHECK ONE: 3.4 Mile Run/Walk (Timed) Pit Row Walk (1mile, not timed)

PLEASE READ WAIVER AND SIGN BELOW. As a participant in The Arc Grand Prix Run, I, for myself, my executor, administrators, heirs, devisees and assigns, do hereby agree to hold harmless NYSARC, The Arc of Schuyler (Schuyler County Chapter of NYSARC, Inc.), Watkins Glen International and its parent, The Arc Grand Prix Run committee, their management, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or their representatives, or their successors from all costs and liability arising out of my participation. I hereby waive all my claims for damage or loss to my person or property, including, but not limited to, illness, death, and serious injury, that I may have against NYSARC, The Arc of Schuyler (Schuyler County Chapter of NYSARC, Inc.), Watkins Glen International and its parent, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or their representatives, or The Arc Grand Prix Run committee which may be caused directly or indirectly from my participation and hereby assume liability for any loss, damage or other liability. I give my full permission for first aid or medical attention as deemed necessary to be provided to me on the premises or to transport me to a hospital for further treatment should I be involved in any accident or health-damaging situation or should I require a form of medical treatment. I hereby attest that I am in proper health and physical condition to participate and assume all risks of participation in this event. I understand that The Arc of Schuyler and Watkins Glen International and its parent are not responsible for any damage, loss or theft of personal property. I agree to respect the property at Watkins Glen International. I hereby grant full permission to use my name, results, and any photographs, videotapes, recordings, or any other record of this event for promotional purposes. I have read the above release and agree to the terms.

Participant Name (please print): _____ Date: _____

Participant Signature: _____

Parent or Guardian Waiver for minors (under 18 years old), if applicable.* The undersigned parent/legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to indemnify and hold harmless NYSARC, The Arc of Schuyler (Schuyler County Chapter of NYSARC, Inc.), Watkins Glen International and its parent, and The Arc Grand Prix Run committee, their management, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or representatives and their successors from all liability, loss, or damages which may be imposed upon said parties because of any defect in or lack of capacity to act and release said parties on behalf of the minor and the parents or legal guardian. Minors waiver only accepted with parent or guardian's signature. If the parent will not be accompanying the minor on the day of the event, the minor must have a notarized parental consent form with them on the day of the event.

Name of Minor: _____ Date: _____

ENTRY FEES

EARLY REGISTRATION (BY 3/11/17)
ALL EARLY REGISTRATION PAID ENTRIES INCLUDE EVENT T-SHIRT.

- T-SHIRT ONLY.....\$15
- YOUTH (5-12).....\$10
- ADULT (13+).....\$25

LATE/DAY OF REGISTRATION
T-SHIRTS GIVEN UPON AVAILABILITY

- YOUTH (5-12).....\$15
- ADULT (13+).....\$30
- Unable to attend, please accept my donation:
\$ _____

TOTAL PAID \$ _____

T-SHIRT SIZE (Circle: Men's or Ladies)
(S,M,L,XL,2X,3X or Youth S,M,L) _____

PAYMENT INFORMATION

Walk-in: Cash/Check/Card Accepted at

- The Arc of Schuyler, 203 12th St., Watkins Glen
- **Mail-in:** Mail completed application & payment to "The Arc of Schuyler, 203 12th St., Watkins Glen, NY 14891
- Check: Payable to The Arc of Schuyler
- Credit Card: I authorize the use of my Visa, MasterCard, Discover or AmEx account.

NAME AS IT APPEARS ON CARD _____

CREDIT CARD # _____

EXP. DATE | SEC. CODE _____

CARD HOLDER SIGNATURE _____