



CHRISTINE PADASAK MEMORIAL

AUTISM AWARENESS 5K RUN & FUN WALK

Saturday, August 6, 2022 9:30 AM

All proceeds to benefit The Children's League

LOCATION: The Children's League
393 North Street, Springville, NY 14141

COST: Kids 10 and Under (includes breakfast) • **Free**
Adults and Children Over 10 • **\$25 (before 7/30)**
\$30 (after 7/30)
Children and Adults with Autism • **Free**

CHECKS PAYABLE TO: The Children's League

MAILED TO: The Children's League
393 North Street, Springville, NY 14141

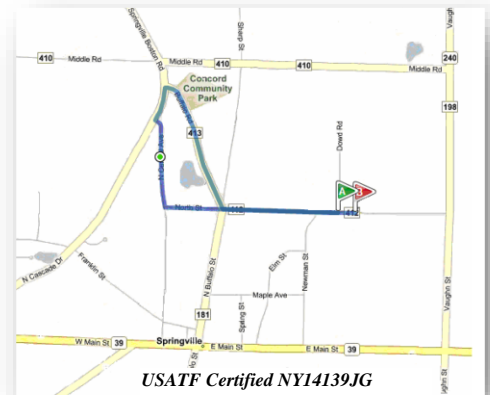
REGISTRATION: ONLINE <http://www.TCL5k.com>
Packet pickup & on-site registration 8:00 to 9:30 race day
Race application available at <http://www.TCL5k.com> and www.BuffaloRunners.com

INFORMATION: Joe Wolniewicz, Race Director – Phone (716) 949-4072 or email: jwolniewicz@msn.com

RACE SWAG: Goodie bag & tech t-shirt guaranteed to everyone registering before July 30.

AWARDS/AGE GROUPS: Awards to the top overall male & female plus awards to the top three in each of the following age groups 14 & under, 15 to 19, 20 to 24, 25 to 29, 30 to 34, 35 to 39, 40 to 44, 45 to 49, 50 to 54, 55 to 59, 60 to 64, 65 to 69, 70 to 74, 75 to 80, & 80 +

POST RACE EVENTS: *All-You-Can-Eat Pancake, Egg & Sausage Breakfast*
(included with registration!)
Games
Basket Raffle and Door Prizes



Please see the reverse for waiver conditions.

A separate race registration form must be completed for each participant

Last Name: _____ First Name: _____ Sex (M/F): _____

Street Address: _____ DOB: _____ Age on Race Date _____

Town/City: _____ State: _____ Zip Code: _____ email: _____

Shirt Size (adult men's): S M L XL 2XL 3XL Shirt Size (youth): S M L

Signature (parent/guardian if under 18) : _____ Date: _____

Please make checks payable to and mail to: The Children's League, 393 North St. Springville, NY, 14141



PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Bib # _____

Event Name: Christine Padasak Memorial - Autism Awareness 5K & Fun Walk

Event Date(s): Saturday, August 6, 2022 9:30 AM

Event Location: 393 North Street, Springville, NY 1414

Sanction #: 21-04-215

For and in consideration of USA Track & Field, Inc. ("USA Track & Field" or "USATF") allowing me, the registrant, to participate in the USA Track & Field sanctioned event I am registering for herein (the "Event" or "Events"); I, for myself, and on behalf of my spouse, children, guardians, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

- 1. I hereby represent that (i) I am at least eighteen (18) years of age... (ii) I am in good health... (iii) I am not under the influence of alcohol...
2. I understand and acknowledge that participation in track & field, road running, race walking, cross country, mountain, ultra, and trail running Events is inherently dangerous...
3. I agree to be familiar with and to abide by the Rules and Regulations established for the Event...
4. I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties...
5. As a condition of my participation in the Event, I hereby grant USA Track & Field, the event director and host organization a limited license to use my name, likeness, image, photograph, voice, video, athletic performance, biographical and other information...

I hereby warrant that I (or the Guardian, if I am under the age of 18) am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by accepting it...

If the participant is under the age of 18, the Guardian hereby agrees to release and discharge the Released Parties as follows: a) The Guardian acknowledges and understands that the Event is inherently dangerous... b) The Guardian acknowledges the rights waived by both the Guardian and the participant... c) The Guardian acknowledges that the Guardian will indemnify the Released Parties...

Participant Name (or Guardian): _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #1: _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #2: _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #3: _____ Age: _____ Date of Birth: ____/____/____ Male Female

Home Address: _____ Home Tel.: (____) _____

Team Name _____ Email Address _____

X _____ / _____

Signature of Participant or Guardian

Date Signed

Revised 5/2020