



Kapaa High School Foundation's FIRST Fun Run/Walk
Saturday, April 16, 2011 ~ Kapaa Beach Park
6:00 a.m. Registration / 7:00 a.m. Start

Last Name _____ First Name _____
Address _____ City, State _____ Zip _____
Phone _____ Email _____

Course (Choose One) 5k Run 5k Walk 10k Run 10k Walk

Gender Male Female

Age Division* 18 and below 18-35 36-49 50 and over Age on day of event _____

*Children under 14 may participate when accompanied by an adult.

Pre-registration (postmarked by Mar. 31, 2011) = \$35.00

Late registration (Apr. 1-14, 2011) = \$40.00 (tank top sizes as available)

Race Day Registration = \$45.00 (6:00 – 6:30 a.m. only; tank top not guaranteed)

Tank Top (adult only) S M L XL XXL

Purchase additional _____ Adult Tanks @ \$20 each Specify Size: _____

Purchase _____ additional breakfast tickets @ \$5 each

Donation of \$_____ to Kapaa High School Foundation

\$_____ TOTAL (make checks payable to **Kapaa High School Foundation**)

Note: No refunds will be made for any cancellations.

MAIL COMPLETED FORM AND PAYMENT TO: Kapaa High School Foundation
c/o 287 Molo St.
Kapaa, HI 96746

PLEASE READ & SIGN (Your registration will not be processed without your signature)

Waiver and release of liability: In consideration of my acceptance of this entry, I acknowledge that participation in this event is a test of a person's physical and mental limits, and carries with it certain inherent risks, including the potential for serious injury or death caused by terrain, facilities, weather, the condition of the athletes and participants, vehicular traffic, actions of other people, including but not limited to participants, volunteers, spectators and coaches. I understand and agree that I am voluntarily participating in the Kapaa High School Foundation Fun Run/Walk and agree to comply with the rules, regulations and event instructions. I certify that I am physically fit and have sufficiently trained for participation in this event, and that my physical condition has been verified by a licensed medical doctor. I, on behalf of myself, my heirs, executors and administrators, next of kin, successors and assigns, insurers, and anyone able to claim through, by or under me hereby waive, release and discharge the Kapaa High School Foundation, State of Hawaii, County of Kauai, event sponsors, and volunteers, their agents, and other related persons or entities from any and all liability for my personal injury, disability, death, property damage, property theft or actions of any kind which may hereafter accrue to me. I further waive, release and discharge the aforementioned entities from all claims of liabilities of any kind arising out of negligence or carelessness on the part of the parties named in this waiver. I understand and agree to the use of my name, pictures and/or interviews in association with the Kapaa High School Foundation for use in broadcast, telecast, advertisements, newsletters, videotape or any other reproduction with no monetary or other consideration to me.

Signature

Date

Signature of parent or guardian if under 18