



**FELLOWSHIP OF
CHRISTIAN
ATHLETES**

Event Title Sponsor:



2017 MARATHON RELAY / JR. MARATHON RELAY

WHEN & WHERE: Date: November 11, 2017 @ Camden Co. High School Track

EVENT TIMES: 9:00 a.m. -- Marathon Relay Middle & High School & Adults – Teams of 5 – 10 with 3 running/walking at one time to complete 26.2 miles. WINNING TEAM IS AWARDED A TEAM MEAL VALUED at \$100

1:00 p.m. – Jr. Marathon Relay Elementary-Aged Teams – Team can be a maximum of 25 students with 5 running at one time to complete 26.2 miles) WINNING SCHOOL IS AWARDED A PIZZA PARTY & TROPHY TO DISPLAY

Entry Fee Categories:

- \$20 Marathon Relay (Cotton T-shirt)
- \$30 Marathon Relay (Moisture Wicking Performance shirt)
- \$15 Marathon Relay (Without Shirt)
- \$10 Jr. Marathon Relay (Cotton T-shirt Only)

Please make checks payable to FCA

Name:	DOB (Mo/Day/Year) ____/____/____	
Address:		
City:	State:	Zip:
E-mail:		
Home Phone:	Cell Phone:	
Emergency Contact Name:		
Emergency Contact Number:		
Team/School:		
T-Shirt Size: Circle One	Adult Sizes: S M L XL XXL	Child Sizes: S M L
CONTACT: Brad Tippins at btippins@fca.org or (912) 882-7202 or visit www.lsecgafca.org		
MAIL REGISTRATIONS TO: FCA 302 S. Lee St. Kingsland, GA 31548		

Registrations received after Oct. 27 will receive t-shirts after the event!

*****PLEASE COMPLETE THE WAIVER ON BACK *****

WAIVER FOR PARTICIPANTS:

PLEASE READ AND SIGN:

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement")

In consideration of participating in the Lower Southeast Coastal GA FCA's Marathon Relay & Jr. Relay Race Event

I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue Lower Southeast Coastal GA FCA, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed name of participant Date:

Signature of participant

IF PARTICIPANT IS UNDER THE AGE OF 18, PLEASE HAVE PARENT OR GUARDIAN SIGN WAIVER BELOW:

Parental Consent

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Printed name of Parent/Guardian Date:

Signature of Parent/Guardian

Questions? Contact Brad Tippins at btippins@fca.org
912-882-7202 (home)

Or see our website: www.lsecgafca.org

Mailing address: 302 S. Lee St. Kingsland, GA 31548