



**Highland View Academy
Application**

Date: October 1, 2023

Time: 9:00 a.m.

Location: HVA campus

Schedule

Registration Start Time: 8:00 a.m.

Registration Close Time: 8:50 a.m.

Race Start: 9:00 a.m.

Awards Ceremony: 10:00 a.m.

Start/End Location: HVA Admin. Parking Lot

Date of Application (mm/dd/yr)

**Registration Cost: \$Free* HVA Student (*Register before Oct.1)
\$25 Sept. 1 - 30
\$30 Oct. 1 (day of the event)**

Name

Address

Phone Number

Email Address

Age

Gender (M/F)

**Shirt Sizes: Adult S M L XL XXL
(Circle One)**

Please send check with application to:

**Tartan 5K Run
Highland View Academy
10100 Academy Drive
Hagerstown MD 21740**

Or for credit card payment complete below:

CC# (AE, MC, Visa)

Expiration Date **CSV** **Card Zip Code**

Cardholder Signature

To pay online, please visit our Giving page (<https://www.highlandviewacademy.com/contact/giving>),
Complete the requested information and place in the Notes field: 2021 Tartan 5K Run

Runner's Bib and your shirt (if you register by Sept.17) will be given to you before the run on the race day beginning at 8 a.m. at the Race Start. Extra shirts may be available at shirt cost after the run.



Event Waiver Form

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director – Highland View Academy, RunSignup.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

Signature of Participant

Date

If participant is under the age of 18 years old, the Parent/Guardian must sign below.

Signature of Parent/Guardian (If participant is under 18 years old)

Date