GREATER FRAMINGHAM RUNNING CLUB

15th Annual GFRC Busa Bushwhack Trail Race* - 10.0 Mile or 5.3 Mile Course

Sunday, October 28, 2018 **Check In: 8:00 - 8:45 am.** **Race start: 9:00 am.**

***Listed in the WMAC Grand Tree Trail Race Series**

GFRC Busa Bushwhack Trail Race 10/28/2018; Liability Waiver/Application Form. Please read, complete, print legibly and sign before running: I know that trail running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete this race. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, the conditions of the trails; all such risks being known and understood by me. I also understand that I'm responsible for my own safety at road crossings and that any type of headphones, ear buds, mp3 players, I pods, strollers, bicycles and pets are not allowed in the race. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I hereby for myself, my heirs and anyone entitled to act on my behalf, waive and release any and all rights, claims, actions or liabilities for damages, present, future, anticipated or unanticipated of any kind resulting from or arising to me during this event, on the way to this event, upon leaving this event or incidental to this event that I may have against: The Road Runners Club of America, USA Track and Field, Greater Framingham Running Club, its members, officers, volunteers, the Towns of Framingham, Marlborough, the Commonwealth of Massachusetts, Sudbury Valley Trustees, Spring Hill Farm, all sponsors, their representatives and successors and all other individuals, entities and organizations associated with the race. I grant permission to all of the foregoing to use my name, photographs, motion pictures, recordings or any account of this event for any legitimate purpose.

BIB#_____**(completed by race registration)** **Date:** ☐☐ / ☐☐ / ☐☐

F. Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **L. Name:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Age on Race Day: ☐☐ **Male** ☐ **Female** ☐ **Street:** ☐☐☐☐☐☐☐☐☐☐

City: ☐☐☐☐☐☐☐☐☐☐☐☐☐ **State:** ☐☐ **Zip:** ☐☐☐☐☐

Phone: ☐☐☐☐☐☐☐☐☐☐

Distance: 10.M ☐ **5.3M** ☐ **Running Club:** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Email: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Runner's Signature. _____ **Race Fee:** **$ 25.00**

(Parent or legal guardian's signature if runner is under 18; ID's required): **Additional $ Support Appreciated** **$**_____

Total Enclosed: **$**_____

Mail signed waiver & completed form with check payable to GFRC to: M. Leigh, 28 Old County Rd. Hudson, MA 01749

THANK YOU!! SEE YOU RACE DAY!!