



Saturday, June 22, 2019  
Syracuse, Indiana

## REGISTRATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age (day of run) \_\_\_\_\_

Do you want to receive monthly e-newsletters with future Syracuse Parks program and event information? Yes \_\_\_\_\_ No \_\_\_\_\_

Register As: Adult (15 & above) \$25 \_\_\_\_\_ Youth (7-14) \$15 \_\_\_\_\_ **\*Space is limited to first 300 entries\***

T-Shirt: Adult Size S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_

Child Size S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_

Included  
T-Shirt (June 7<sup>th</sup> Deadline)  
Mudtastic Classic Finisher Medal  
Mudtastic Classic Run Bib  
Post Run Snack  
Goodie Bag

**\*Participants must register by June 7 to receive a t-shirt\***

### GROUP INFORMATION

(complete only if you registering as part of a team)

Team Name: \_\_\_\_\_ \*Group Leader : \_\_\_\_\_ Phone Number: \_\_\_\_\_

Team Type: Youth \_\_\_\_\_ Adult \_\_\_\_\_ Youth & Adult \_\_\_\_\_

**\*Group Leader will notify their teammates of their starting time the week of the event**

**\*Mudtastic Towels will be awarded to costume winners for the 3 best dressed groups**

**If not registering as part of a group, please name anyone you would like to run with. We will attempt to accommodate every request:**

### WAIVER AND RELEASE OF LIABILITY

In consideration of the acceptance of this entry to the Mudtastic Classic, I waive all claims for myself, my heirs and assigns against and hereby release the Syracuse Parks & Recreation Department, Town of Syracuse, Wawasee Area Conservancy Foundation, all event sponsors, and any other persons assisting on a voluntary basis or otherwise, in putting on the event for any liability to me or them including any injury or illness which might result from my participation. I state that I am in proper physical condition to compete in the Mudtastic Classic. I hereby assume full responsibility from any risk or bodily injury, death or property damage due to negligence and assume all risks associated with participation in this event including, but not limited to falls, contact with other participants, the effects of weather, traffic and the condition of the course. All risks are known and appreciated by me. Further, I understand that event participants may be photographed by the Syracuse Parks & Recreation Department and the local media for publicity of the event.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

### PARENT/GUARDIAN WAIVER AND RELEASE OF LIABILITY FOR MINORS

I, the undersigned, being the parent or legal guardian of the participant who is less than 18 years of age, hereby represent that I have read and understand the foregoing Waiver and Release of Liability and/or have had the opportunity to discuss it with event organizers to my satisfaction. In my capacity as parent/guardian of the participant, and on behalf of the participant, the participant's estate, assigns and successors in interest, I hereby agree to waive and release from liability each of the Releasees as identified above in the same manner as indicated above. Further, in consideration of the participant's application and for being permitted to participate in this event, on behalf of the participant, the participant's estate, assigns and successors in interest, I hereby agree to indemnify and hold harmless each of the Releasees as indicated above in the same manner as indicated above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date