



LGAA 5K & CORPORATE TEAM CHALLENGE

When: Wed., April 16, 2014

Time: 5 p.m. Registration. 6 p.m. Start

Where: Ironwood Golf Course

2100 NE 39th Ave. Gainesville, FL 32609

Benefitting: LGAA's Community Grant Program ~ Awarding community grants to community programs for over 20 years.

REGISTRATION CATEGORIES

Adult (13 years and older) Includes Technical Shirt*

- \$20 - Advance Registration RECEIVED by 3/31/14
- \$25 - Advance Registration RECEIVED between 4/1/14 and 4/9/14
- \$30 - Registration RECEIVED between 4/10/14 and 4/14/14 or Onsite at 5 p.m.

Adult (13 years and older) No Technical Shirt Included

- \$17 - Advance Registration RECEIVED by 3/31/14
- \$20 - Advance Registration RECEIVED between 4/1/14 and 4/9/14
- \$25 - Registration RECEIVED between 4/10/14 and 4/14/14 or Onsite at 5 p.m.

Children (12 years and under) No Technical Shirt Included

- \$5 - No shirt included



Make checks payable to: Leadership Gainesville Alumni Association (LGAA)
*Technical shirts are not guaranteed with on-site registration. First come first served.

U.S. Mail to: Kim Mitrook
c/o LGAA
LifeSouth Community Blood Centers
4039 Newberry Road
Gainesville, FL 32607

SPONSORSHIP OPPORTUNITIES AVAILABLE
Contact: Kim Mitrook @ kwmitrook@lifesouth.org
or call 352-224.1704

COMPLETE THIS SECTION FOR PAPER REGISTRATION --Please make payment based on date of submission to Leadership Gainesville Alumni Association. All payments are non-refundable. PLEASE PRINT LEGIBLY!

Name: _____ Telephone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip Code: _____ Date of Birth: _____

Circle

Sex: ____ Shirt Size: no shirt child S M L XL Team (if applicable): _____

As participant in Leadership Gainesville Alumni Association (LGAA) Run sponsored by the LGAA referred to herein as ACTIVITY, I am fully aware of the risks and hazards connected with my participation in running a 5K, and hereby elect to voluntarily participate in the Activity, knowing that the Activity may be hazardous to me or my property. I VOLUNTARILY ASSUME ALL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in the Activity, WHETHER CAUSED BY THE NEGLIGENCE OF THE ORGANIZATION OR ITS VOLUNTEERS, AGENTS, or otherwise. I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Organization, its membership, and their officers, servants, agents, employees, or volunteers (hereinafter "RELEASEES") from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES or otherwise, while participating in the Activity. It is my express intent that this Release and Hold Harmless Agreement (hereinafter "Agreement") shall bind the members of my family, if I am alive, and my heirs, assigns and personal representatives, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Agreement shall be construed in accordance with the laws of the State of Florida.

Signature of Participant: _____ Date: _____