



# AVID Trojan Trail 5K Run/Walk



## 8:00 a.m. Saturday, April 30, 2016

*Sponsored by Stewart's Business & Tax Service*

**Registration and Entry Fees:** Please complete the registration sheet below prior to the event. Submit your registration form and \$20 entry fee on the day of the event. Please arrive no later than 7:30 in order to expedite the registration process and begin at 8:00.

**Race Location & Description:** Silver Valley High School, 35484 Daggett-Yermo Rd., Yermo, CA 92398. This is a *TRAIL* course (sand, gravel, etc., strollers not recommended) that follows the SVHS Cross Country route ending on the SVHS track.

**Proceeds:** All funds earned will be used to award a scholarship to an AVID senior at SVHS.

**Make Checks Payable to:** Stewart's Business & Tax Service

**Contact:** Rebecca Heldreth (760) 254-2963 ext. 2284, email rheldreth@svusdk12.net, or fax (760) 254-3043.

----- detach here -----

### AVID Trojan Trail Entry Form \$20 Registration Fee

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Waiver (MUST BE SIGNED)**

I understand, acknowledge and agree that Silver Valley Unified School District, its employees, officers, agents or volunteers shall not be liable for any injury/illness suffered by me and/or by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity and I voluntarily assume all risk, known or unknown, of injuries, howsoever caused, even if caused in whole or in part by the action, inaction, or negligence, of the released parties to the fullest extent allowed by the law. I attest that I will participate in this event as a footrace, that I am physically fit, and have sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeness, as well as any photographs and any record of this event in which I may appear for any legitimate purpose, including advertising and promotion.

I acknowledge that I have carefully read this VOLUNTARY ACTIVITIES PARTICIPATION FORM and I understand and agree to its terms.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian if under 18 \_\_\_\_\_

\*\*Participants 10-years-old and younger must be accompanied by an adult.\*\*