



Sunday, September 29th, 2024

Bib#:

Age Group:

PARTICIPANTS

Last Name _____ First Name _____

Address _____

City/State/Zip _____ Phone _____

DOB _____ Age on Race Day _____ Gender: MALE FEMALE

MAKE CHECKS OUT TO: Kentfield Schools Foundation.

Required: Each runner must fill out a release form. No exceptions.

\$20/Fun Runner. My check & signed release form are included.

I have paid online at kikschoools.org and I will return the signed release form by mail or bring to race.

**Register in advance: Check-in at Kent 8:45-9:35 am • Race 9:45 am sharp start
• Includes Admission to Family Fun Day • Preschoolers and younger run free if their family runs • Strollers OK • No pets • Race ends at Bacich • Family friendly
Special Prizes - Kentfield Dental**

Please charge my credit card for Full Amount: \$ _____ VISA MC AMEX

Credit Card #: _____ Exp. Date: _____ / _____

Signature: _____ CSV#: _____

Zip Code /email/phone #: _____

Paid Not Paid

WAIVER/RELEASE I know that running this Fun Run and 1k Run are potentially hazardous activities, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but no limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or roller blades, animals, and personal music players are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the **Kentfield Schools Foundation/Kentfield School District & Family Fun Day**, the city of **Kentfield/Greenbrae**, all event sponsors, event organizers, volunteers and participants, their representatives and successors and affiliates from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature: _____ Date: _____

Parent's Signature if under 18 years: _____ Date: _____

**Please drop off forms at KIK office by Friday, September 27 by 3:00 pm.
750 College Ave., Kentfield, CA 94904 or fax form to 415-458-5137.**

kikschoools.org