

La Corrida de Colores



Friday, August 11, 2017 Downtown Taft, Tx (Green Avenue)

- Hosted by Justin Goben, Maggie Alvarado & Families
- Please Register by August 8, 2017 Entry Fee: \$10 per person.
- Please wear white and prepare to be colored!
- Check in begins at 5pm, **Run/Walk begins promptly at 6:30pm.**
- All proceeds go to Immaculate Conception Church in Taft, Tx.

Name:

Date of Birth: / /

Age:

Address:

City

State

Zip

Phone ()

Email

Total Runners

Total Paid

(Attach additional forms & Waivers)



*Please list relevant medical conditions on back of form.

***Children under the age of 12 must be accompanied by an adult.**

Release & Waiver

(If under 18, must be signed by parent or guardian)

Name:	Date of Birth:
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I know that running is a potentially dangerous activity and that I should not enter this event unless I am medically able and properly trained, and that physical injury, illness and even death may result from risks inherent in this sport. I assume all risks associated with participating in this event, including, but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the roads/trails and traffic on the course. Having read this RELEASE & WAIVER and in consideration of the acceptance of my entry, I, on behalf of myself and my representative and successors in interest, release and agree to indemnify, defend and hold harmless, even though any risks may arise out of negligence or carelessness on their part, ICC, The City of Taft, and all sponsors of this event and all agents, employees and representatives of the above, from all claims, suits, liabilities and actions. I grant permission for interested persons to photograph and record my participation in this event for publicity.

Signature	Date
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Release & Waiver

(If under 18, must be signed by parent or guardian)

Name:	Date of Birth:
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I know that running is a potentially dangerous activity and that I should not enter this event unless I am medically able and properly trained, and that physical injury, illness and even death may result from risks inherent in this sport. I assume all risks associated with participating in this event, including, but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the roads/trails and traffic on the course. Having read this RELEASE & WAIVER and in consideration of the acceptance of my entry, I, on behalf of myself and my representative and successors in interest, release and agree to indemnify, defend and hold harmless, even though any risks may arise out of negligence or carelessness on their part, ICC, The City of Taft, and all sponsors of this event and all agents, employees and representatives of the above, from all claims, suits, liabilities and actions. I grant permission for interested persons to photograph and record my participation in this event for publicity.

Signature	Date
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Additional Participant Form

Name

Date of Birth: / /	Age:
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Phone ()	Email
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Name

Date of Birth: / /	Age:
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Phone ()	Email
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Name

Date of Birth: / /	Age:
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Phone ()	Email
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