7th Annual Kaye Walton Memorial

Run4Hunt

February 25th • 9:00AM

Official Entry Form



Please return this form with payment to R.B. Hunt before race day. If entering by mail, send to: R.B. Hunt, 125 Magnolia Drive, St. Augustine, Florida 32080

Last Name		First Name	
Address			
City		State	Zip
Home Phone		E-Mail Ad	m dress
Male ☐ Female ☐ Birthday:	/_	/	Age on 02/25/2017:
No t-shirt for me, please. Use my entir	re entry	fee to sup	port the Kaye Walton Fund. 🖵
Entry Fe	aranteed e of \$1	d only to th	ose registering by February 14, 2017
No refunds will be issued		-	
Classrooms will be awarded prizes based on psponsoring: Student:			•
I know that running/walking a road race is a potent properly trained. I agree to abide by any decision of all risks associated with running/walking in the R participants, the effects of weather, including low to and all other such risks being known and apprecentation of your accepting my entry, I, for my Elementary School, St. John's County School Bo representatives and successors from all claims or liab that liability may arise out of negligence or carelessn the forgoing to use any photographs, motion pictures	tially haza race official Run4Hunt emperature ciated by self and a pard, & al polities of a less on the	Event, includes, high heat me. Having anyone entitled ll event sponsony kind arisin part of the pe	my ability to safely complete the run/walk. I assume ling, but not limited to: falls, contact with other and/or humidity, traffic and conditions of the road read this waiver and knowing these facts and in to act on my behalf, waive and release R.B. Hunt ors, and their agents, all event volunteers, their g out of my participation in this event even though rsons named in this waiver. I grant permission to all
Runner's Signature The undersigned Parent or Guardian hereby consents for liability as is more fully set forth in the above wai			Date stion and waives and releases all rights and claims
Parent or Guardian Signature (If Participan	t is unde	er 18)	 Date