



Itasca County Fair

First Annual Tortoise and Hare Run/Walk

REGISTRATION FORM

Join us for our first-annual Run/Walk event at the Itasca County Fair August 21, 2022. Registration will start at 8am at the Trailhead Building with the race starting at 9am at the start of the Mesabi Trail at the back of the fair grounds parking lot. Cost of the event will be \$20 and includes a t-shirt.

It is open to everyone of all abilities. That means you can participate in the event whether you run, or whether you walk, or whether you wheel to the finish line. It does not matter. We just want you to come and do it and have fun! Go as far as you want and as fast as you want. Trail will be marked for a 5k.

Register below by filling out the form. You must complete a form for each person that wants to participate.

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____
Email _____
Birthdate _____ Gender _____

Circle your t-shirt size below.

Adult size: SM MED LRG XL 2XL 3XL Youth size: SM MED LRG

Read and sign the ASSUMPTION OF RISK, RELEASE AND
WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT.

Every participant MUST sign this form in order to join the event.

MAIL TO: ICAA P.O. Box 763 Grand Rapids, MN 55744 or bring to event.

ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT

PLEASE READ THE FOLLOWING CAREFULLY AND IF YOU HAVE ANY QUESTIONS, PLEASE ASK THEM BEFORE SIGNING THIS DOCUMENT.

In consideration of participating in Itasca County Fair Walk/Run on August 21, 2022, I state that I understand the nature of this event and that I am in proper physical condition to participate in such activity. I acknowledge that if I believe that conditions are unsafe, I will immediately discontinue participation in the activity. I willingly and voluntarily agree to the following, or, if applicable, as guardian of the participant, I voluntarily execute this Agreement on behalf of my ward and agree to the following:

Assumption of Risk: I understand that this activity I may participate in may be dangerous or have risks. These risks may include serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place or other risks not know to me or not readily foreseeable at this time. I assume full and sole responsibility for any injuries, costs, and/or damages I incur as a result of my participation in this activity.

Medical Condition: I declare that I am physically capable of participating in this activity.

Waiver, Release, and Indemnification: I release, waive, discharge and hold harmless Itasca County Fair and its directors, employees, volunteers, agents, other participants, and sponsors from any and all liability, claims, demands, action or causes of action arising out of or related to any loss, destruction, damage or injury, including death, that may be sustained by me, or any personal property belonging to me, which may result from participation in this activity. I understand that this Agreement also binds my spouse, heirs, executors, administrators, and assigns.

Photographic Release: I give Itasca County Fair the right, ownership and interest in any and all photographs, images, video or audio recording of me or my voice made by Itasca County Fair in connection with my participation, which may be used in newsletters, brochures, or web post.

Other: As a participant, I agree that this Agreement is intended to be broad and inclusive to the extent permitted by the law of the State of Minnesota. I agree that in the event that any clause or provision of this Agreement is deemed invalid, the enforceability of the remaining provision will not be affected.

I have read this Assumption of Risk, Release and Waiver of Liability, and Indemnity Agreement, and fully understand its terms. I acknowledge that I am signing this Agreement voluntarily and in doing so I have given up substantial rights. I have signed it without any inducement and I intend by my signature for this to be a complete and unconditional release of all liability.

Signed on this _____ day of _____, 2022.

Signature of Participant Date

Signature of Parent if child under 18 years/Guardian of Participant Date

Relationship to Participant

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