**TAHPERD Virtual 5K run/walk**

**Benefiting TN students & teachers, through professional development and grants**

**September 12-October 24, 2021 (4pm)**

<http://www.tahperd.us/>

**Donnadey0226@gmail.com**

Name (first, last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age on Race day: \_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZipCode:\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-Shirt Size (shirts only guaranteed for those registered by October 11th)

\_\_\_ no shirt, donate more $ to TN kids \_\_\_ small \_\_\_ medium \_\_\_ large \_\_\_ x-large \_\_\_ xx-large

Choose an option for shirt:

Pick up at convention \_\_\_\_ Mail it to me \_\_\_\_

Registration (by October 11th) fee $35 \_\_\_\_\_\_\_\_ cash/check/credit

Late registration (October 11-22nd) fee $40 \_\_\_\_\_\_\_\_ cash/check/credit

I want to support TN students and teachers with an additional donation of: $\_\_\_\_\_\_\_\_\_ (mail in registration only)

Registration options:

Online: <http://www.tahperd.us/>

By mail, send completed forms to:

TAHPERD

Atten: Donna Dey

3928 Rhonda Ct

Clarksville, TN 37040

Tennessee Association for Health, Physical Education, Recreation, and Dance (TAHPERD) Virtual 5K 2021

I fully understand that participating in the TAHPERD Virtual 5K event, that has been organized as a virtual activity where I run/walk on my own, at a date and time of my choosing, in a location and route of my choosing, which will have no support or security measures in place by TAHPERD, is potentially hazardous and could result in injury or death. I acknowledge that by participating in the activity outlined by this virtual event, I do so of my own free will and at my own personal risk. I will not participate in a virtual event 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 further agree to abide by the latest recommendations of the Center for Disease Control’s (CDC) to prevent the spread of Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC’s guidance at: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/outdoor-activities.html>. I attest that if a shelter in place order is in effect, that I will only participate in the virtual event by using a personal treadmill, and I will not run outside in the community during the duration of a shelter in place order. I agree to follow all pedestrian safety ordinances including running/walking on a sidewalk where available and not in the road.  I agree to follow the rules of the road if no sidewalk or multi-use trail is available, and I will run against oncoming traffic and not with traffic.

I agree to abide by any decision of a race official relative to any aspect of my participation in this virtual event, including the right of any official to deny or suspend my participation for any reason whatsoever.  I attest that I, having read the rules of the virtual race scheduled for the TAHPERD Virtual 5K including the terms in this waiver, the timeline of the virtual event, and agree to abide by them. I assume all risks to me associated with running/walking on my own as part of this virtual activity, including but not limited to: falls, contact with other pedestrians, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road or trail, all such risks being known or unknown and appreciated by me when out running/walking on my own without any type of support from local officials or event organizers.

Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Tennessee Association for Health, Physical Education, Recreation, and Dance, and the city of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this virtual event, and waive my ability to bring any legal action against the entities outlined in this waiver as I am voluntarily electing to run on my own as part of this virtual event.  I grant permission to all of the foregoing to use my photographs which I may share online as part of the event, personal data provided during registration and post-event reporting, video or audio recordings, or any other record of this event for any legitimate purpose.  I understand that this event does not provide for refunds in the event of unforeseen circumstances and/or cancelation, and by signing this waiver, I consent that I am not entitled to a refund if any of the previous occurs before or during the event.

Printed Name (Participant): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name of guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of guardian for minors (under 18yrs) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email this completed form to donnadey0226@gmail.com