

# Jeff Parks Triple Crown of Running / Mini marathon training



Saturdays, 8am at the Nachand Fiedhouse

Cost: \$25 (includes t shirt), FREE if you don't want a shirt

(price does not include RACE FEES, you must register on your own)

Come dressed for the weather, we will run outside!

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Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Payment: c/o Jeffersonville Parks and Recreation Department

500 Quartermaster Ct., Rm. 212

Jeffersonville, IN 47130

**Questions? Call (502) 639-3293**

"I have enrolled in the personalized health and fitness program offered through the City of Jeffersonville Parks and Recreation Dept. I recognize that the program may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and training, and other various fitness activities. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this exercise program. I acknowledge that my enrollment and subsequent participation in purely voluntary and in no way mandated by the City of Jeffersonville." "In consideration of my participation in this program, I hereby release the City of Jeffersonville and its agents from any claims, demands, and causes of action as a result of my voluntary participation and enrollment." "I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this program and I hereby release the City of Jeffersonville from any liability now or in the future for conditions that I may obtain. These conditions may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that I may incur, including death." In signing this document, I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Participants Signature \_\_\_\_\_