Roxana Community Park District
Dashin' Thru The Lights
5K Fun Run/Walk Registration Form

December 2, 2023 at 6:00 PM
Check in by 5:30 PM
$20 per participant

Includes Shirt and Number – sign up by November 21st to be guaranteed a shirt

Register by Thursday, November 30th in person at the Rox-Arena,
by mail or online at signupville.com/roxana
Roxana Park, #2 Park Dr, Roxana IL, 62084
For Questions Call 618-254-7485

NAME_____ MALE_____ FEMALE_____

ADDRESS_____

CITY_____ STATE_____ ZIP CODE_____

PHONE_____ EMAIL_____

EMERGENCY CONTACT_____ PHONE_____

AGE ON RACE DAY_____ Participant # (Office Use Only) _____

T-SHIRT SIZE: please circle one

YOUTH L	ADULT S	ADULT M	ADULT L	ADULT XL	ADULT XXL
Smallest Size					Largest Size

AWARDS: Overall male and female 1st, 2nd, 3rd place

1st, 2nd, 3rd place Male and Female from each age division:

12 and under, 13- 19, 20-29, 30-39, 40- 49, 50-59, 60+

Waiver, Release, and Indemnification Form

In consideration of the acceptance of my entry in the Dashin' Thru the Lights 5K:

1. I hereby agree to comply with all rules and regulations and event instructions of the Roxana Park District 5K and its Supporting Organization members.
2. For myself, or my representative, I hereby

(a) Waive and release any and all claims that I may have against the Roxana Park District, Village of Roxana, Phillips 66, Toolen's Running Start, their officers, directors, members, volunteers, and employees including any and all claims for damage caused by the negligence of any of them, arising out of my participation in the event and any cost incurred as a result of any such claim whether valid or not and:

(b) Indemnify and hold harmless each of them against any such claim that I or my guests or representatives may have or assert.

3. I hereby acknowledge that I have sole responsibility for my personal possessions during the 5K event.
4. I hereby acknowledge that participation in the Dashin' Thru the Lights 5K carries with it potential hazard. I therefore release the Roxana Park District and its supporting organizations, their officers, directors, members, volunteers, and employees of any liability in the event of injury or death during the event.

I hereby consent to receiving medical treatment, which may be deemed advisable in the event of injury, accident, or illness during the Roxana Park District's Dashin' Thru the Lights 5K.

Printed Name: _____ Signature: _____ Date: _____

Children 17 and under must have parent/guardian signature