



Name: \_\_\_\_\_  
Last First

**Liability Waiver**

I have submitted my entry for participation in the Annual Beat Michigan 5K® race. I know that running a road and / or trail race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I understand that if I do not abide by that decision the consequences may include, but are not limited to, barring me from entry in future Beat Michigan 5K® races. I assume all risks associated with participating in this event including, but not limited to: falls; contact with other participants; the effects of weather, including precipitation and cold temperatures; traffic and the conditions of the road and trail; all such risks being known and appreciated by me. For my safety, I understand that bicycles and radio headsets are not allowed in the race and I will abide by this guideline.

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 Tau Beta Pi organization (both the Ohio Gamma local chapter and the national organization), The Ohio State University and all other sponsors and representatives from all claims or liabilities of any kind arising out of my participation in this event, though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I permit my photograph or likeness to be used for any legitimate purpose.

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

If under 18, your parent or legal guardian must sign here:

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

**Emergency Contact Information (Required)**

Emergency Contact Name: \_\_\_\_\_  
Last First

Emergency Contact Phone: ( \_\_\_\_\_ ) \_\_\_\_\_