



REGISTRATION FORM

Saturday July 8th, 2017 | 7:00 AM | Melham Park

Day-Of registration and participant check-in will begin at 6:30 AM at the Melham Sports Complex

Registrations must be received by Tuesday, June 27 to **GUARANTEE** you a participant bag and t-shirt

Select One: 5K _____ 10K _____ 1 Mile Walk _____ 10 Mile Bike _____ 20 Mile Bike _____

YOUTH 1 Mile Run Race at 8:30 AM (For ages 15 and under) _____

Please fill out the following participant information:

Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Email: _____ Send me Chamber E-Blasts so I can learn about other fun events happening in Broken Bow

Male _____ Female _____

Under 19 _____ 20-34 _____ 35-49 _____ 50+ _____

T-Shirt Size (please circle):

S M L XL XXL

Medals awarded for 1st, 2nd & 3rd in all races!

Registration Fee:

_____ \$20.00 with t-shirt OR

_____ \$15.00 without a t-shirt

Make check payable to Broken Bow Chamber of Commerce.

Enclosed _____

Return Registration to: Broken Bow Chamber Office
424 South 8th Ave. Suite 4
Broken Bow, NE 68822

Thank You Sponsors

Pearson Physical Therapy, PC; Steffens Law Office; Broken Bow Wind II, LLC; Universal Insurance; KBEARCountry 92.3; Bow Booterie; Custer title & Abstract; AseraCare; Shelter Insurance; Custer Public Power; Black Hills Energy; and Nebraska Army National Guard.

Bottled water provided by; Culligan,
Granola bars by; Grocery Kart
Fruit by; Schmick's Market.

Pearson Physical Therapy & A Kneaded Touch Massage Therapy Clinic will be at the event and available for anyone in need of assistance before or after the race!

WAIVER OF LIABILITY

20 & 10 MILE BIKE RIDE 10K & 5K AND 1 MILE WALK

I AFFIRM THAT I AM VOLUNTARILY PARTICIPATING IN THE 20 & 10 MILE BIKE RIDE, 10K & 5K RUN AND 1 MILE WALK and Youth Run/Bike.

AND I UNDERSTAND THAT TRAFFIC IS NOT STOPPED BEFORE OR DURING THIS RACE. I FURTHER ACKNOWLEDGE THAT I KNOW, UNDERSTAND AND APPRECIATE THE INHERENT RISKS OF BIKING, RUNNING AND WALKING. I AFFIRM THAT I VOLUNTARILY ASSUME RISK FOR ALL INJURIES RESULTING FROM THE INHERENT RISKS OF BIKING, RUNNING AND WALKING. IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE 20 & 10 MILE BIKE RIDE, 10K & 5K RUN AND 1 MILE WALK

I HEREBY RELEASE ON BEHALF OF MYSELF, MY FAMILY, MY HEIRS, AND MY ASSIGNS, THE BROKEN BOW CHAMBER OF COMMERCE, ITS EMPLOYEES, AGENTS AND SPONSORS FROM LIABILITY FOR INJURY, DEATH OR LOSS SUFFERED BY ME WHILE PARTICIPATING IN THE

20 & 10 MILE BIKE RIDE, 10K & 5K RUN AND 1 MILE WALK and Youth Run/Bike

I HAVE READ, UNDERSTAND & AGREE TO THE ABOVE:

NAME: _____ SIGNATURE _____

Parent Signature if under 18 yrs. _____