

3rd Annual St. Andrew Catholic School Crusader Classic 5k & Mile Fun Run

Saturday, April 6, 2019 at Market Common http://standrewschoolmb.com

REGISTRATION FEES			
Date	5k	Fun Run	
Until 3/25/19	\$35	\$20	
3/26 - 4/6/19 *shirt not guaranteed	\$40	\$25	

	5k Run/Walk	\$
	USATF certified course	
	1 Mile Fun Run	\$
Tot	al Amount Enclosed	\$

START TIMES		
5k	8:00 am	
Fun Run	9:00 am	

RACE LOCATION: Grand Park at Market Common, Myrtle Beach, SC 29577 (Directly across from Valor Memorial Garden on Farrow Pkwy)

(Parent or Guardian if under 18)

PAPER REGISTRATION

Mail form to*:
St. Andrew Catholic School
3601 N. Kings Hwy
Myrtle Beach, SC 29577
*Must be received by March 29, 2019

OTHER WAYS TO REGISTER

Complete Online at:
http://standrewschoolmb.com
Community > Crusader Classic 5k & Fun Run

April 5, 2019 from 5pm-7pm at Fleet Feet 7931 N. Kings Hwy Suite 120 Myrtle Beach, SC 29572 843.839.3338

On Race Day Near Starting Line: Beginning at 7:00am

PACKET PICK-UP

1. April 5, 2019 from 5pm-7pm at Fleet Feet 7931 N. Kings Hwy Suite 120 Myrtle Beach, SC 29572 843.839.3338

2. On Race Day Near the Starting Line: Beginning at 7:00am

AWARDS

5k: Top 3 Overall Male/Female

5k: Top 3 Male/Female age groups: 14 & Under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

Fun Run: All participants under age 18 will receive a Medal

All proceeds benefit St. Andrew Catholic School Tuition Assistance Fund

Name			Sex: M F	Age on Race Day	
Address					
			State	Zip	
Phone	Er	nail			
	Unisex Shirt Size:	Youth: S M L	Adult: S M L X	L XXL	
Emergency Contact _			Pho	ne	
	Please make check	s payable to: St.	Andrew Catholic	School	
	Circle	One: Check	Credit Card		
Credit Card #			Expiration	Date	
Card Holder			Signature		
Billing Address					
City			State	Zip	
Total Amount Enclos	sed \$			Entry Fee Non-refundal	ole
SIGNATURE:				DATE:	•••••



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Parental/Guardian Consent Form and Liability Waiver

I grant permission for my child to participate in this activity. This activity will take place under the guidance and direction of St. Andrew Catholic Church and School (is understood to include Bishop of Charleston a Corporation Sole) and/or volunteers from St. Andrew Catholic Church and School.

As a parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend St. Andrew Catholic Church and School, its officers, directors, and agents, and the Diocese of Charleston, coaches, chaperons or representatives associated with the event, arising from or in connection therewith, and I agree to compensate St. Andrew Catholic Church and School its officers, directors and agents and the Diocese of Charleston, coaches, chaperons, or representatives associated with the activity for reasonable attorney fees and expenses arising in connection therewith.

I know that running a road race is a potentially hazardous activity. I know that my child should not enter and run unless medically able and properly trained. I agree to abide by any decision of a race official relative to my child's ability to safely complete the risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road or track, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in act on my behalf, or my child's behalf waive and release St. Andrew Catholic Church and School and its officers, directors, agents and the Diocese of Charleston, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of negligence or carelessness on the part of the persons named in this waiver. I further authorize and empower the event director to consent to and authorize any medical care or treatment for the minor which may appear reasonably necessary as a result of emergency, accident or illness of the minor whether occurring before, during, or after the event.

Medical Matters: I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child.

Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor.

Photographs & Press Release: I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this for any legitimate purpose.

General Race Rules: I understand that bicycles, skateboards, baby joggers, roller skates or inline skates, animals, and radio headsets are not allowed in the race and I will abide by this guideline.

SIGNATURE OF PARENT/GUARDIAN:	
NAME (please print):	DATE:



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Athletic and Sporting Events ADULT HOLD HARMLESS/INDEMNITY AGREEMENT WAIVER

St. Andrew Catholic Church and School (is understood to include Bishop of Charleston a Corporation Sole.)

EVENT: St. Andrew Catholic School Crusader Classic 5k & Mile Fun Run DATE: Saturday, April 6, 2019

I, the participant, agree to defend, protect, indemnify and hold harmless St. Andrew Catholic Church and School and Bishop of Charleston a Corporation Sole against and from all claims arising from the negligence or fault of myself, the participant, or any of their agents, family members, officers, volunteers, helpers, partners, organizational members or associates which arise out of St. Andrew Crusader Classic 5K Run/Walk and 1 mile Fun Run. Additionally, I, the participant, agree to protect, defend, hold harmless and fully indemnify St. Andrew Catholic Church and School and Bishop of Charleston a Corporation Sole for any claim or cause of action whatsoever arising out of St. Andrew Crusader Classic 5K Run/Walk and 1 mile Fun Run, which takes place on April 6, 2019, that is brought against St. Andrew Catholic Church and School and Bishop of Charleston a Corporation Sole by myself, the participant, or their family members whether such claim arises from the alleged negligence of the St. Andrew Catholic Church and School and Bishop of Charleston a Corporation Sole, its employees or agents or myself, the participant's, negligence. If any portion of this agreement is held invalid, it is agreed that the balance thereof, shall continue legal force and effect.

I know that running a road race is a potentially hazardous activity which could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform in this event, and am in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation for any reason whatsoever. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road or track, all such risks being known and appreciated by me. 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 St. Andrew Catholic Church and School and Bishop of Charleston a Corporation Sole, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Photographs & Press Release: I grant permission to all of the foregoing to use my photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

General Race Rules: I understand that bicycles, skateboards, baby joggers, roller skates or inline skates, animals, and radio headsets are not allowed in the race and I will abide by this guideline.

SIGNATURE OF EVENT PARTICIPANT:	
NAME (please print):	DATE: