



## Registration/ Waiver

Participant's Name \_\_\_\_\_

Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent phone number \_\_\_\_\_

Parent E-mail \_\_\_\_\_

Child T-shirt Size \_\_\_\_\_

**The fun run is a half mile run around the BRHS sports fields.  
The first 100 participants will receive a medal.  
The first 78 participants will receive a t-shirt.  
Start time is 11:00 am at the BRHS track**



**LIABILITY WAIVER AND RELEASE:** Upon acceptance of my child's entry, I, hereby release the sponsors and officials of the High Mountain Half Marathon from any and all liability arising from illness, injury, or death my child may suffer from participating in this event. I attest that my child is physically fit and able to participate in the High Mountain Half Children's Fun Run. I am aware that my child's participation in this event could, result in physical injury. I consent to having my child treated for injury by the volunteers assisting with the Fun Run. I give permission for free use of my child's picture in any official account of this event.

Parent's/ Guardian's Signature \_\_\_\_\_

Date \_\_\_\_\_

## Fun Run Sponsored by



**Around The Mountain Pediatric Dentistry**  
4720 W Maverick Lane, Suite 102  
(Behind White Mountain Fun Park)  
Lakeside, AZ 85929  
Phone: (928) 251-4056  
[www.atmpd.com](http://www.atmpd.com)