



Alpha Xi Delta's Step It Up 5K & 10K Walk/Run Registration Form

DATE: Saturday, March 30th, 2013

TIME: Register: 8:30am, Race Start: 10am

PLACE: Lake Zorinsky- South 156th Street
(Shelter 5)

Contact:

Karly Kalina/Val Bolte
ΑΞΔ CO Philanthropy Chairs
(402)201-4879/(402)515-7955
knkalina@unomaha.edu/vbolte@unomaha.edu

Mailing Address:

Alpha Xi Delta – Gamma Delta
Student Orgs & Leadership
Programs Office
6001 Dodge Street
Omaha, NE 68182

(Mail entry form to this address)

Make checks out to Alpha Xi Delta

ENTRY FEE: \$25 Adults
\$15 Students
\$10 Children (12 and under)

ENTRY FORM:

TEAM MEMBERS: (not required)

Name: _____

Teammate #1: _____

Address: _____

Teammate #2: _____

Teammate #3: _____

Telephone: _____

Teammate #4: _____

*Email: _____

Teammate #5: _____

RACE: (Circle One)

5K

10K

T-Shirt Size: (Circle One) S M L XL XXL

(Please mail this form to the provided address. If wanting to race as a team, please fill out the required fields.)

Waiver, Release of Liability and Indemnification

In exchange for my being allowed to participate in Gamma Delta Chapter of Alpha Xi Delta's AmaXing Challenge: Step It Up (herein "activity"), I, (being at least 18 years old (strike if inapplicable), agree to be bound by each of the following:

Assumption of Risk.

I assume all risks, known and unknown, in any way connected with my participation in the Activity.

Waiver and Release.

I waive and release Alpha Xi Delta Fraternity, the Chapter identified above, any affiliated organizations of either of the foregoing and their respective directors, officers, employees, agents and volunteers (collectively, the "Fraternity Parties"), from all claims that I may have for any liability, injury, loss, or damage in any way connected with my participation in the Activity, including but not limited to any injury or loss caused in whole or in part by the negligence or misconduct of any of the Fraternity Parties.

Indemnification.

I agree to indemnify and hold harmless (in other words reimburse and be responsible for) the Fraternity Parties from all claims, liability, loss, damages, costs and expenses in any way connected with omissions of my guests or invitees, including but not limited to any injury or loss caused in whole or part by the negligence or other misconduct of any of the Fraternity Parties.

Miscellaneous.

This instrument shall be binding upon my heirs and/or personal representatives and shall inure to the benefit of the Fraternity Parties and their respective heirs, personal representatives, successors and assigns. If any provision of this instrument is held to be invalid or unenforceable, this instrument shall be construed as if such invalid or unenforceable provision was not contained herein.

Applicable Law.

In view of the fact that the Fraternity's national headquarters is located in Indiana, and in order to provide certainty in the law to be applied to the construction and enforcement of this instrument, this instrument shall be construed and enforced in accordance with the law of the State of Indiana.

I have read this waiver, release of liability and indemnification. I understand that I have given up substantial rights by signing it. I am signing this waiver, release of liability and indemnification voluntarily.

Printed name: _____ Signature: _____

Date: _____

If the person participating in the Activity is not yet 18 years old, the signature of a parent or legal guardian is required.

As a parent or legal guardian of the above-named person, I permit the above-named person to participate in the Activity upon subject to all terms and provisions of this waiver, Release of Liability and Indemnification.

Parent of Legal Guardian (print): _____

Signature: _____ Date _____