

Franklin Performing Arts Company 5K Road Race & 1 Mile Fun Run Sunday, May 3, 2020



May 3rd will be the second annual Franklin Performing Arts Company 5K Road Race & 1 Mile Fun Run. It will begin and end at the company's home THE BLACK BOX. Along the route, runners will be entertained and encouraged by sidewalk art created by student artists. THE BLACK BOX theater will feature face painting and finish line sign making for children and a celebration with live music in the theater lobby to celebrate the runners.

Location: THE BLACK BOX, 15 West Central Street, Franklin, MA Check-in and day-of registration starts at 9:00 am

5K Road Race:

\$25 pre-registration/\$35 day-of
T-Shirts for first 75 registered for 5K Road Race
Race begins at 10:00 am
Awards to top 3 in the following age groups (Male and Female)
Under 20, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

1 Mile Fun Run:

\$10 pre-registration/\$15 day-of Race begins at 10:05 am Award for Top 3 in 1 Mile Fun Run

Free activities will begin at 10:00 am!

For more information call the Franklin Performing Arts Company at 508-528-3370 or email ibreslin@fpaconline.com

Mail in registration closes April 30. Day-of registration available 9-10 am Register online at: www.fpaconline.com

Franklin Performing Arts Company 5K Road Race & 1 Mile Fun Run Registration

Forward completed form to:

Michele Webster, Franklin Performing Arts Company, P.O. Box 48, Franklin, MA 02038

Checks made payable to Franklin Performing Arts Company

Last Name:	First Name:				
Address:	Phone:				
City:	State:	Zip:			
Email:		_ Birth Date:	Gender:	□ Male	☐ Female
Participating in: ☐ 5 K	Run 🛘 1 Mile Fun F	Run			
T-Shirt Size for 5K only: (size not guaranteed for			availability of each	size at tir	me of registration)
RELEASE AND WAIVER In consideration of the ac Participant is under the ac waive ander release any Franklin Performing Arts (the "Releasees") for any any way to my participation omissions of the Release Event. I also covenant no to any liability, claim(s), d fees) of any kind or nature Event, including claims for further agree that if, desp Releasees, I will indemnifi incurred as the result of s I consent to administratio and indemnify Releasees costs resulting from any r Releasees shall in no way	ceptance of my entry to ge of eighteen, the Parti and all right to and clain Company, Inc., and all cand all injuries to me or on in the Event, including es. This release included to sue, and further agremand(s), cause(s) of a er ("Liability") which may or Liability caused in who ite this Agreement, I, or fy, defend and hold harm such claim. In of first aid and/or other from any and all liability medical attention and/or y be liable or responsible.	participate in this event icipant's parent or legal ins for damages or injurie of their agents, sponsors my personal property vigical graphs for liability causes all injuries and/or darree to indemnify, defendention, damage(s), loss of arise out of, result from one or in part by the neglianyone on my behalf, in inless each of the Release or medical treatment in the or claims arising out of treatment that I receive efor any of these costs.	t (the "Event"), I, the guardian, intending that I may have so, representatives, which may arise or sed in whole or in mages suffered by d and hold harmle for expense (include, or relate in any viligent acts or omist nakes a claim for sees from any such the event of injury of such treatment.	ne Participate to be less against to voluntee out of, resurpart by the me beforess the Realing court way to my esions of the Liability and challess or illness and understay respons	coant or if the egally bound, hereby the Event Director, irs, and employees alt from, or relate in the negligent acts or ire, during or after the leasees, with respect costs and attorneys' participation in the he Releasees. I gainst any of the es which any may be and hereby release and that any and all sibility and the
certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for ne completion of this event and that my physical condition has been verified by a licensed Medical Doctor.					
authorize the taking and/or use of photographs or videos that include my image for promotional, informational, or other reasons deemed to be in the best interest of the event.					
I acknowledge that the er Releasees may delay or o postponed, cancelled or o	cancel the event for any				
I recognize, intend and ur	nderstand that this relea	se is binding on my hei	rs, executors, adm	ninistrator	s, or assignees.
In the case that the Partic guardian of said Participa my permission for Particip Release both for myself in	int. Furthermore, after foant to participate in the	ully informing myself rec same. I fully ratify, acc	garding the nature ept and agree to a	and risks	s of the event, I give
I acknowledge having rea	ad and agreed to the abo	ove waiver.			
Signature:		rdian if under 18 years o	Date	e	
(Must be sig	ned by a parent or guai	rdian it under 18 years c	ot age)		