

Connecting our communities, creation, and our Creator.

### Chumstick FUNdRUN 2017

A fundraiser supporting the work of Camp Camrec

<http://www.camrec.org>

[director@camrec.org](mailto:director@camrec.org)

#### 5K Run/Walk

Saturday, September 2, 2017

**Location:** Camp Camrec 18899 Little Chumstick Creek Rd. Leavenworth WA, 98826

**Time:** Saturday @ 10am.

**Course:** New and improved Camrec trails and National Forest Service roads!!! Kind grades

**Register:** Please pre-register by mail by August 15 to:

Camp Camrec 18899 Little Chumstick Creek Rd. Leavenworth WA, 98826

**Entry Fee:** FREE/ by Donation

**Runner Age Divisions:** 13 & under; 14-19; 20-29; 30-39; 40-49; 50 & over

More information and registration forms at [camrec.org](http://camrec.org)

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### Entry Form

**Chumstick FUNdRUN 5K Run/Walk –Saturday, September 2, 2017**

(Each registrant must complete a form)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Make sure to fill out an **RSVP Form** found at [camrec.org](http://camrec.org)!

#### Assumption of Risk and Liability Release

I know that running/walking a trail is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of race officials relative to my ability to safely complete the run. I assume all risks associated with participating in the event, including, but not limited to, falls, contact with any participants, the effect of the weather including high heat and humidity, traffic and the condition of the trail with all such risks being known and appreciated by me. In consideration of the privilege of participating in this event, I, for myself, and my heirs, executors and administrators, waive the liability of and release Washington Mennonite Fellowship DBA Camp Camrec, volunteers, organizers, adjacent property owners, and any individuals or organizations otherwise involved with the operation of this event for and from any and all claims, damages, demands, or actions whatsoever that may arise as a result of my participation in this event. I grant Washington Mennonite Fellowship the right to use my image in any photographic or video records of this event for any legitimate purpose. I have carefully read these terms and fully understand their contents. If I am under 18 years of age at the time of registration, my parent or legal guardian has completely reviewed this Assumption of Risk and Liability Release and understands and consents to its terms on my behalf to the full extent permitted by law, and authorizes my participation by his/her signature below. Because of the nature of this event, registration fees are non-refundable.

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Participant Signature**

**Parent/Guardian Signature if participant under 18**

**Date**