Temporary Recreation Event Application for Lucille or Wildhorse Trail



CONTACT INFORMATION:

SIVU Don't RAUS Name of Organization	Do Box 342 Mals	Website Pacis Con
Emergency Contact	Email address	UCM Phone
EVENT INFORMATION:		
Event Name Event Location: Lucille Trail	Event Date Wildhorse Trail	8:00 Am Event Time From Cobb)
Approx. number of Participants:	20 Went Marout	ion is a central
Marathen Cou	so that qual Bignow Ench	itres participants
Staff may require additional information b	efore issuance of permit.	
APPROVAL SIGNATURES Police Chief	Due CLA Public Works Director	Cornellanity Development Director
City Clerk	Resolution # and Date:	
SAVE Affidavit Received	Fees Waiver Approval	-

Please return this completed application to the Community Development office at: 4488 Pineview Dr. Powder Springs, GA 30127



OCTOBER 26, 2019

19TH ANNUAL HALF MARATHON

Mail In: By July 27 - \$70

By Sept 28 - \$75

By Oct 24 - \$80 RACE DAY \$90!

Or Register On-line at Active.com

Full & Half Marathon on the Silver Comet Trail Atlanta's flattest & fastest!

USAT&F certified & sanctioned for PRR & BQ.

CHIP TIMED!! FINISHER SHIRT & MEDAL

8TH ANNUAL MARATHON REGISTRATION **ON-LINE ONLY AT ACTIVE.COM**



CHIP TIMED! FINISHER SHIRT! Awards: Top 3 Overall, Masters, & 5 yr age groups. Free download of race day photos.



Questions? silvercometraces.com

Sign Up Today!

SILVER COMET HALF MARATHON REGISTRATION FORM

Incomplete / Illegible applications WILL NOT be accepted. Please SIGN MAIL TO SILVER COMET RACES, PO BOX 362, MABLETON GA 30126

Total: \$	E-MAIL:								
MALE/FEMALE:	AGE 10/26/19:	D	OB:	T-shirt:	S	M	L	XL	XXL(+\$2)
Last Name:	First Name:								
Address:	7 Marie 19 M		The second street of the second						144
City:		State:	Zip:	Tel:					

Release Form: | know that | am participating in a road race that is a potentially hazardous activity and I should not enter and participate unless | am medically able and properly trained to do so gree to abide by any RULES and decision of race officials relative to my ability to safely complete the run/walk. I assume all risks associated with participation in this event including, but not limited to alls, contact with other participation in this event including high heat and/or humbility. traffic and the conditions of the race course, all such risks being known and appreciated by me. In consideration of being allowed to participate in The Silver Comet Races 19th Annual Half Marathon, 8th Annual Marathon & Fun Run on October 26, 2019 ("EVENT") and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned represents and agrees as follows: I agree, for myself and for my personal representatives, beirs, and nex of kin, to hereby release, and discharge from any and all liability and waive any claim which I might state against Silver Comet Races. Dana Greene, Kroger and each of its subsidiaries, affiliates and here respective officers, employees, sponsors, independent contractors, volunteers, representatives, successors & assigns (hereinafter Silver Comet Race Parties) as a result of any itjury, including leath, sustained by me or loss to my property while participating in this EVENT, whether caused by negligence, breach of warranty (express or implied) or otherwise and whether foreseed to inforeseen, while I am traveling to or from, or participating in the EVENT or resulting from my acceptance or use of any prizes awarded in connection therewith. I agree to indemnify and hold Silve Comet Races and each of its subsidiaries, affiliates and their respective officers, employees and representatives harmless from any and all liability, expense, loss and damage, and to provide a defense from any claim subsidiaries, affiliates and to provide a defense from any cla consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release Silver Comet Races, Dana Greene, The Kroger Company, the event committee, a other sponsors, invitees, participants, vendors and their successors and heirs from all claims of liabilities of any kind arising out of my participation in this event though liability may arise out o regligence on the part of the persons named in this waiver. This release shall be binding upon successors, my representatives, heirs, executors, assigns, transferees and me.

HAVE CAREFULLY READ THE FOREGOING RELEASE AND FULLY UNDERSTAND ITS CONTENTS AND SIGN IT WITH FULL KNOWLEDGE OF

THIS SIGNIFICANCE. Dated this day of

Signature (Parent signature if applicant is under 18 years old)

Date

For our records, PLEASE TELL US where you learned about this race_