

Heartland Kiwanis Run for Riley

BENEFITING



Riley Children's Foundation



Scan Me to Register Online

The 2024 Heartland Kiwanis "Run for Riley" 5K Run/Walk circling through the Ivy Tech campus and the Columbus Municipal Airport in Columbus, IN. This is the official site for our second annual event to support all Indiana Children who need special medical and related services. All proceeds will go to Riley Hospital to support the overwhelming needs of children. Kiwanis has partnered with Riley to support its efforts in many ways for over 100 years, and the event held on May 11, 2024, will be another opportunity to support Indiana children and their parents.

Register by May 1st: \$25 includes t-shirt, gift bag, and door prize chance tickets (Must receive by May 1)

Register After May 1/Day of race: \$30 includes gift bag and t-shirt while supplies last

Mail In Registration: Steve Bayer, Run for Riley, 3651 Valley Dr. Columbus, IN 47203

Make checks payable to: Kiwanis Run for Riley. Registration online: www.indianatiming.com

Day of Registration/Check in/Bib Pick up 7:30-8:15 at entrance to Ivy Tech on 4475 Central Ave., Columbus, IN.

Contact Info: srbayer52@icloud.com or Steve Bayer (812) 343-5915

2024 Heartland Kiwanis 5 K Run/Walk Registration Form-May 11, 2024

I am registering for the 5K Run ___ 5K Walk ___

First Name _____ Last Name _____

Email Address: _____

Home

Address _____

City _____ State _____ Zip _____

Phone _____ Age Day of Race _____ Male ___ Female _____

T-Shirt Size: Youth Med ___ Youth Lg ___ Small ___ Med ___ Large ___ XL ___

2X ___ 3X _____

Emergency Contact Name _____ Phone _____

Please sign and date the waiver and release form on back and mail in this entire sheet.

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Kiwanis
Heartland Division

RUN FOR RILEY 5K Kiwanis Clubs of Heartland Division Release and Waiver of Liability, Assumption of Risk and Indemnity And Parental Consent Agreement

In consideration of participating in the Riley 5 K Run/ Walk, I represent that I understand the nature of the event and that I and/or my minor children are qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that I and/or my minor children believe event conditions are unsafe, I and /or my minor child will immediately discontinue participation in the Activity.

I fully understand that the Riley 5K Run/ Walk event involves risks of serious bodily injury, including viral infections, bacterial infections and other communicable diseases and illnesses, permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and there may be other risks either known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibilities for losses, costs and damages I and/or my minor child incur as a result of my and/or my minor child's participation in the Activity.

I hereby release, discharge and covenant not to sue Riley Hospital, Ivy Tech Community College or Kiwanis clubs of the Heartland Division mentioned above, its respective administrators, directors, agents, officers, volunteers and employees, other participants, and sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "RELEASEES herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by negligence of the releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my and/or minor child's behalf, makes a claim against the Releasees, I will indemnify, save and hold harmless each of the Releasees from any loss, liability, damage, or cost which may incur as the result of such claim.

I also grant Riley Hospital/Heartland Kiwanis Clubs permission to use my likeness, image, voice and words on television, radio, film, or any form to promote activities of Riley Hospital/Kiwanis Heartland.

I have read this RELEASE and WAIVER of LIABILITY, ASSUMPTION of RISK, And INDEMNITY AGREEMENT and PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any INDUCEMENT or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed Name of participant

Signature of Participant/Legal Guardian if under 18

Date: _____