2020 Heartland Series 39.3
Registration Form

LIBERTY HALF (3/7/20) RTP (4/4/20) RWTC (5/9/20)

Name _____

Address_____

City/ST/Zip _____

Phone _____**Email**_____

CIRCLE ONE: Male Female

This will be your _____ year participating in the Heartland Series 1st 2nd 3rd 4th 5th 6th 7th 8th 9th

Date of birth :_____

Shirt size (Circle One) Men: S M L XL XXL XXXL
Women: S M L XL XXL

Circle Wave: Wave A: under 1:45 Wave B: 1:50-1:59 Wave C: 2:00-2:09
Wave D: 2:10-2:19 Wave E: 2:20-2:29 Wave F: 2:30-2:39
Wave G: 2:40 +

Through 10/13 - $177 **10/14 - 12/29 – $204** **12/30- 2/9 – $230** **2/10 – 4/1 - $260** **After 4/1 - $280**

Entry fees_____

Waiver: I know that participating in a running event is a potentially hazardous activity. I will not enter and participate unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I assume all risk associated with participating in this event including but not limited to falls, contact with other participants, and effects of weather, traffic, and facility or road conditions. Having read this waiver, knowing these facts and in consideration of your accepting my registration, I, for myself and anyone entitled to act on my behalf, waive and release and covenant not to sue the KC Running Company, Sponsors, Kansas City, Burns & McDonnell, Event Officials, or Volunteers, City of Kansas City, Kansas City Parks and Recreation Department, Sponsors, Bucyrus, Holy Rosary Wea School, Event Officials, or Volunteers, City of Liberty, Liberty Hospital, their representatives, successors, or assignees from any and all claims or liabilities of any kinds arising out of or in connection with my participation in event, including without limitation, claim or liability resulting from those matters described in this paragraph. This release and waiver extends to all claims of any kind or nature whether foreseen, known or unknown. The undersigned further grants full permission to KC Running Company and/or agents authorized by them to use any photographs, video tapes, motion picture, recording or any other record of this event for any purpose.

Signature_____ **Date**_____
(Parent's signature required if participant is a minor)

MAKE CHECKS PAYABLE TO AND MAIL COMPLETED ENTRY FORM TO:

KC Running Company
200 E. 135th Street
Kansas City, MO 64145