The Polar Climb 3K Walk or 5K Run Registration Form

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ ☐ Male ☐ Female Age _____

Email Address _____

I am running/walking for Special Olympics Athletes in ____Ripley/Ohio/Dearborn Counties
____Shelby County ____Franklin County ____Decatur County

Age Groups
14 & Under
15 to 24 Year Olds
25 to 34 Year Olds
35 to 44 Year Olds
45 to 54 Year Olds
55 & Over

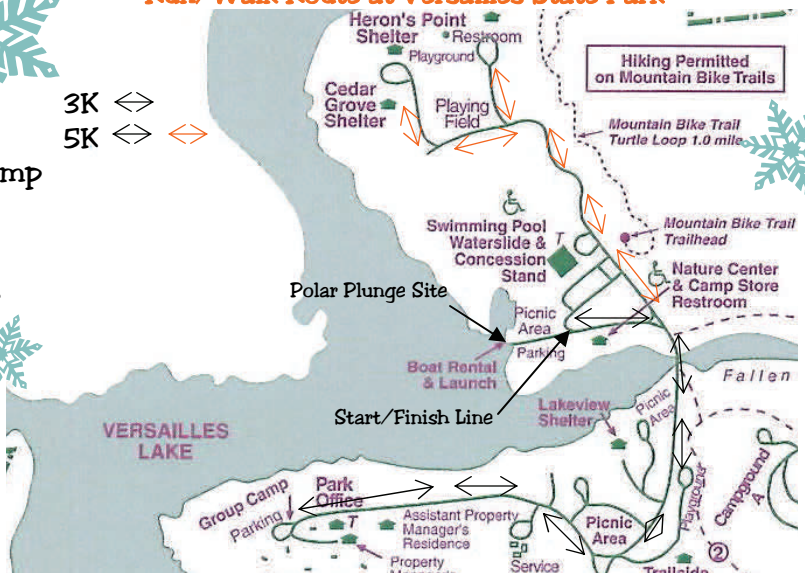
Run/Walk General Information

Date: Saturday, February 16, 2013
Location: Versailles State Park
Registration Time: 10:00 a.m.–10:45 a.m.
Registration Location: Versailles Lake Boat Ramp
Run/Walk Time: 11:00 a.m.
Admission: $35 minimum in pledges.
First 100 receive an official Polar Climb t-shirt.

Special Olympics Indiana

Freezin' For A Reason 2013 POLAR PLUNGE to benefit Special Olympics Indiana

Run/Walk Route at Versailles State Park



The Polar Climb Run/Walk, part of the wacky winter festivities of the Freezin' for a Reason 2013 Polar Plunge and After Splash Bash, is a 3K or 5K run/walk through the scenic hills and woods of Versailles State Park that will take you to a spectacular view of Versailles Lake, the official Plunge site. All proceeds from this wacky event benefit Special Olympics Indiana athletes in your community, giving them the means to train locally and to compete at the state level in a number of Olympic-type sports.

DONOR NAME	PLEDGE
www.StuartRoadRacing.com TOTAL	$

Feeling Like A Real Polar Bear?

Then after the Polar Climb why not take the Plunge? To register visit www.soindiana.org and click on

Register online now!

$35 minimum to run/walk. Make checks payable to: **Special Olympics Indiana**
Please bring completed registration form, signed waiver and pledges day of event.
All runners/walkers will receive an official Polar Climb t-shirt, while supplies last.

Please be sure to complete and sign the "Release and Waiver of Liability, Assumption of Risk and Indemnity, and Parental Consent Agreement" on the back of this form.

For more info contact Greg Townsend (812) 584-6861 or g.townsend@soindiana-rod.org or Jimmy Laub (812) 584-6960

SPECIAL OLYMPICS INDIANA
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

In consideration of participating in the **Special Olympics Indiana Polar Plunge/Polar Climb,** I represent that I understand the nature of the Polar Plunge event and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I and/or my minor child believe event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Activity.

I fully understand that the **Special Olympics Indiana Polar Plunge/Polar Climb** event involve risks of serious bodily injury, including 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 that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility 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 **Special Olympics Inc., Special Olympics Indiana**, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any 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 the 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 my minor child's behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.
I also grant Special Olympics Indiana permission to use my likeness, image, voice and words on television, radio, film, or in any form to promote activities of Special Olympics Indiana.
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 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 (only if age 18 or over) Date:

_____ _____
Signature of Parent/Legal Guardian (if participant under age 18) Date