

RELEASE OF RESPONSIBILITY

In consideration of your accepting my entry, I intend to be legally bound, do hereby for myself, my heirs, my executors and administrators, waive and release forever any and all rights and claims for damages I may accrue against all persons and agencies including but not restricted to, The City of Jeffersontown, Jeffersontown Chamber of Commerce, Norton Suburban Hospital, Pacers & Racers Running Store and the County of Jefferson and any other city involved with promoting the race as listed by name, their successors, representatives, and assigns for any and all injuries suffered by me while traveling to and from and while participating in the Gaslight 5K Run/Walk in Jeffersontown, Kentucky and I hereby represent that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in this event.

Signature of Entrant

Date _____

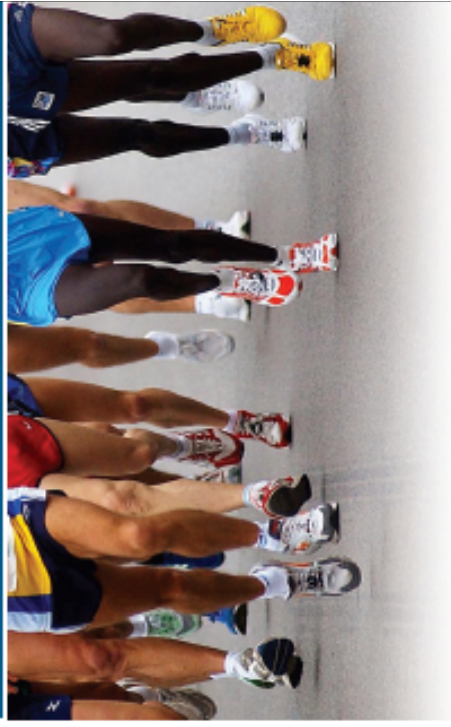
Signature of Parent/Guardian if Entrant is under 18

Date _____

For Further Information, contact the Chamber
(502) 267-1674

The Chamber Jeffersontown
10434 Watterson Trail
Jeffersontown, KY 40299

GASLIGHT FESTIVAL 5K RUN / WALK 2010



JEFFERSONTOWN GASLIGHT FESTIVAL

2010

SPONSORED BY



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