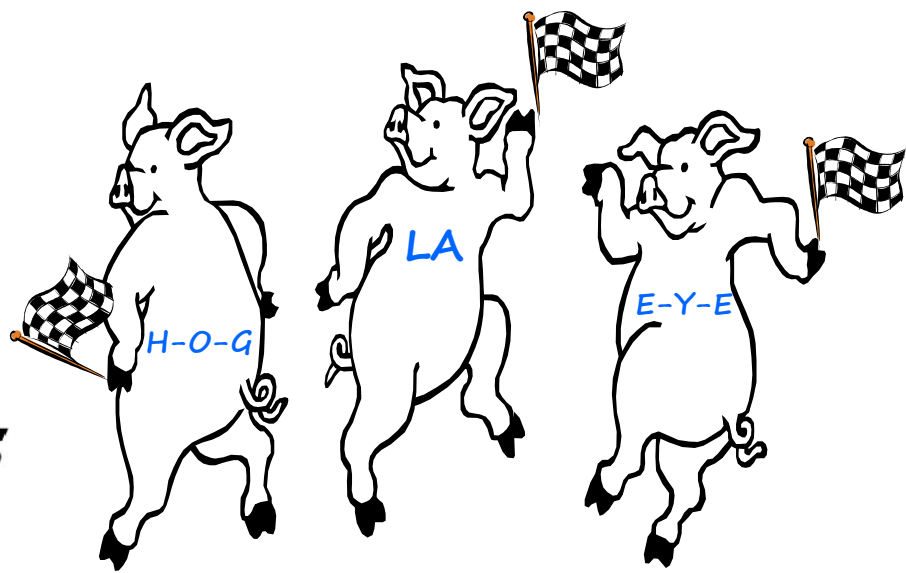


1st Annual
City of Livingston
Hog Eye 5K Run

Sponsored by



When: Saturday, June 13, 2009
 Registration begins at 6:30 am
 Walk/Run starts at 8:00 am
 Where: On the Square in Livingston
 -beginning at the Post Office
 Entry Fee: \$20 before June 5th/ \$25 day of Race
 Entry fee includes T- Shirt - All forms received before June 5th will be guaranteed a t-shirt on the day of race.

Kids Fun Run
Sponsored by
Overton County
Right to Life
FREE!! - Begins at 9:30 a.m.

Awards Presentation - 10:00 am

- Top overall Male and Female Winners
- Medals for top runner in each age group: 11 and under, 12-15, 15-20, 21-25, 26-30, 31-25, 36-40, 41-45, 46-50, 51-55, 56-60,61 and up

All Proceeds go to:
Livingston Jaycees Scholarship Fund—Christmas For Kids
Shooters Education—Camp Discovery
Overton County Right to Life
Overton County Habitat for Humanity
 For more information, please contact: David Sadler
 260-7494 or dls273@yahoo.com

COMPLETE and MAIL ENTRY FORM TO:

LIVINGSTON JAYCEES—P.O. BOX 284 LIVINGSTON, TN 38570

LAST NAME: _____ FIRST NAME: _____
 ADDRESS: _____ City, State, Zip: _____
 PHONE: _____ Age: _____ Gender Male Female
 T-Shirt Size—please circle: Small Medium Large X-Large XX Large

WAIVER OF LIABILITY—PLEASE READ BEFORE SIGNING. I, The undersigned, intending to be legally bound, hereby, hereby, for myself, my family my successors, assignees, heirs, executors, administrators, forever waived, release and discharge any and all rights, claims for damages, causes of action whether in law, equity or otherwise, known and unknown, that I or any of them, may have against the Hog Eye 5 K Run, Livingston Jaycees, The City of Livingston, all sponsors of the event, and their officers, directors, employees, volunteers, independent contractors, agents and representatives, successors and assignees, for any and injuries, illnesses or other harm suffered by me in or as a result of this event. I understand that there will be no refunds if event cannot be staged or is cancelled for any reason. We reserve all rights to cancel the event and shall not be liable for any actual or consequential damage. I attest that I understand precautions must be taken when running in warm or cold conditions. And on uneven surfaces. I will abide by the decisions of any race official. I also agree to abide by any decision of an appointed race official or medical official relative to my ability to safely continue or complete the event. I further assume and will pay my own medical and emergency expenses in case of an accident, illness, or incapacity regardless of whether I have authorized such expenses.. I have read this waiver carefully and understand it. IF ATHLETE IS UNDER 18: The signature certifies that my son/daughter has my permission to participate in the Hog Eye 5 K Run. The signature has read the foregoing RELEASE AND WAIVER OF LIABILITY AGREEMENT (above) : and by signing intentionally and voluntarily agrees to its terms and conditions. The signature further certifies that my son/daughter is in good physical condition and is able to safely participate in the Hog Eye 5 K Run. I hereby authorize medical treatment for him/her and grant access to my child's medical records as necessary.

Signature: _____ Date: _____