



# Monster Dash

## 2021 Registration Form

Event Date: Sunday, October 17, 2021, Event Time: 11:30am Registration, 1:15pm Monster Dash, 2:00pm 401K Road Race, 3:00pm Awards

In the spirit of the original Woburn Host Lions Parade, the Monster Dash is a costume walk, kids fun run and 2.5 mile road race. Prizes will be given to the top finishers and best costumes for both male and females in each age category. Some event features will be music provided by DJ Tumi, Halloween Games. Grilled food will be available by the Woburn Host Lions (donation advised). The Woburn cross country team will be the ghouls on the race course and the trick or treat route.

LIONS PARK AT HORN POND, WOBURN PKWY, WOBURN, MA, 01888

Fun Run ages 5 years old to 14 years old

2.5 Mile Race for ages 14 years and older

Awards: Top 3 Men and Women in each category

\$401 Prize for best team costume theme

T-Shirts: All runners and walkers registered by October 17, 2021

All proceeds will go to Lions Charities

Race will be professionally timed by Raceroster.com

### STEP 1 SELECT A CATEGORY

2.5 Mile Race - \$15.00    Fun Walk - \$10.00    Kid's Fun Run - Free

### STEP 2 - FILL OUT THE ENTRY FORM or Save Time with Online Registration: [www.raceroster.com](http://www.raceroster.com)

First name \_\_\_\_\_ Last name \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal code \_\_\_\_\_

Club \_\_\_\_\_

Age (on 10/17/2021) \_\_\_\_\_ Gender \_\_\_\_\_

T-shirt \_\_\_\_\_ Email \_\_\_\_\_

### GENERAL WAIVER:

I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against North Shore Timing, its affiliates, and subsidiaries, and their respective directors, and employees, and sponsors, coordinating groups and any individuals associated with Monster Dash on 10/20/2021, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Athlete is fully aware of the risks and hazards inherent in participating in the Event and hereby elects to voluntarily participate, knowing the risks associated with the Event. Athlete hereby assumes all risks of loss(es), damage(s), or injury(ies) that may be sustained by him/her while participating in the Event. Further, I hereby grant full permission to any and all of the foregoing to use my likeness in all media including, but not limited to photographs, broadcasts, newspapers, brochures, or any other record of this event for any legitimate purpose without compensation. Athlete acknowledges that the entry fee paid is non-refundable and non-transferable. Athlete acknowledges and agrees that Monster Dash, in its sole discretion, may delay or cancel the Event if it believes the conditions on the race day are unsafe. In the event the Event is delayed or cancelled for any reason, including but not limited to: fire, threatened or actual strike, labor difficulty, work stoppage, insurrection, war, public disaster, flood, unavoidable casualty, acts of God or the elements (including without limitation, rain, hail, hurricane, tornado, earthquake), or any other cause beyond the control of Monster Dash there shall be no refund of the entry fee or any other costs of Athlete in connection with the Event. ATHLETE HAS READ THE FOREGOING AND INTENTIONALLY AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT. IF ATHLETE IS UNDER AGE 18 HIS/HER PARENT OR GUARDIAN MUST SIGN THIS RELEASE AND WAIVER AGREEMENT. Athlete's Parent or Guardian's signature above certifies that my son/daughter/ward has my permission to participate in the Event. Athlete's Parent/Guardian has read and understands the foregoing RELEASE AND WAIVER OF LIABILITY AGREEMENT (above) and by signing intentionally and voluntarily agrees to its terms and conditions. Athlete's Parent/Guardian further certifies that my son/daughter/ward is in good physical condition and is able to safely participate in the Event. I hereby authorize medical treatment for him/her and grant access to my child's medical records as necessary and as stated above.

By signing you agree to the above waiver.

Signature: \_\_\_\_\_