



POLAR PLUNGE.



FOR SPECIAL OLYMPICS ARKANSAS

Saturday February 2, 2019

5K Registration 9:00am RACE: 10 am

Plunge registration 10:30 am

Prizes 11:30 Plunge – 12 Noon

Lake Dardanelle State Park

5K Entry Form:

Name: _____

Address: _____

Phone: _____

Email: _____

T-Shirt Size: **Small** **Medium** **Large** **X-Large** **2X**

Early Entry by: January 28, 2018. Payment due by the day of the race

Entry Fee: \$25.00 Check Payable to **Special Olympics Arkansas**

Mail to: Area 17 Special Olympics
1073 Maple Springs Rd
Russellville, AR 72802

If under 18 see below:

In consideration of participating in the Polar Plunge Splash and Dash 5K run, I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity.

Parental Consent Required (if runner is under 18 as of 2/01/17). I, the minor's parent and/or legal guardian, understand the nature of the above referenced activity and the minor's experience and capabilities and believe the minor to be qualified to participate in said activity

I have read this release and waiver of liability, assumption of risk, and indemnity agreement, understand that I have given up substantial rights by signing it and have signed it freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of 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.

Date: _____ Participant Signature: _____

Parents Signature: _____

For more info: so17ar@gmail.com or 479-264-4831 or 479-237-5182