



## Union City Breast Cancer Awareness 5K

In recognition of Breast Cancer Awareness, Union City has dedicated the month of October as "UC Pinktober." The City will host a Breast Cancer Awareness 5K on Saturday, October 22, 2016. The American Society will be accepting donations and proceeds will benefit breast cancer research.

**Date:** Saturday, October 22, 2016.

**Time:** 9:00am-11:00am

**Location:** City Hall, Union City (5047 Union Street, Union City GA 30291)

**Race Description:** 3 mile walkathon/run will be an unofficially timed, flat route perfect for strollers, families, and children to run or walk.

**Early Registration:** Please complete the release form and 5K registration form below. They can be faxed to 770-306-6861, emailed to [contactuc@unioncityga.org](mailto:contactuc@unioncityga.org), or mailed to Union City at 5047 Union Street, Union City, Georgia 30291 or hand delivered to Union City, City Hall.

**Late Registration:** Applications will be available the morning of the event, however we suggest all participants submit registration materials prior to the 5K to guarantee a t-shirt.

**Parking:** Free parking will be available at the event location.

For questions or more information please visit [www.unioncityga.org](http://www.unioncityga.org) call 770-964-2288 or email [contactuc@unioncityga.org](mailto:contactuc@unioncityga.org)

**RELEASE OF LIABILITY WAIVER:**

I hereby represent that (i) I am in good health and in proper physical condition to participate in the Union City Breast Cancer Awareness 5K; and (ii) I am not under the influence of alcohol or any illicit or prescription drugs which would in any way impair my ability to safely participate in the event. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the 5K.

The City of Union City reserves the right to revoke the access to the 5K at any time when the participant is operating contrary to the rules and regulations of the City of Union City. I hereby swear or affirm that I or any heir, releases and forever discharges the City of Union City, its employees, agents, and officers from all claims, demands rights and cause of action of whatever kind and nature arising from any and all participation in the 2016 Union City Breast Cancer Awareness 5K. It is expressly understood that the City of Union City shall in NO WAY be liable for damage, destruction, theft or loss of any kind to any property or for injury arising out of participation in the 5K.

I hereby warrant that I have read this Agreement carefully, understand its terms and conditions

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

Date: \_\_\_\_\_

**MINOR RELEASE:**

And I, the minor's parent and/or legal guardian, understand the nature of the 5K and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the release from all liability claims, demands, losses, or damages on the minor's account cause or alleged to be caused in whole or in part by the negligence of the releases or otherwise, including negligent rescue operation and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releases named above, I will indemnify, save, and hold harmless each of the releases from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

Printed Name of Parent/Guardian:  
\_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature (if participant is under the age of 18):  
\_\_\_\_\_



## Union City 2016 5K Registration Form

Date:

First Name:

Last Name:

Will you be attending with a group/organization (Please check one):

Yes

No

If so, what is the name of the group/organization?

Address:

City:

State:

ZIP:

Phone:

Email:

Age:

Gender (Please check one):

Female

Male

Emergency Contact Name:

Emergency Contact Number:

Please circle your t-shirt size (**NOTE: One t-shirt per registration**):

Adult: S M L XL XXL XXXL

Child: XS S M L

How did you hear of this event? (Please check all that apply)

Banner

Flyer

Email

Other (Please list):

Thank you for filling out your 5K registration form. Please fax, mail or hand deliver completed application in order to complete the registration process. For questions, email [contactuc@unioncityga.org](mailto:contactuc@unioncityga.org), call 770-964-2288 or visit our website at [www.unioncityga.org](http://www.unioncityga.org)