

# GREENWAY MEMORY MILER

# Greenway Memory Miler

Saturday, November 7<sup>th</sup> at 9am

Register online at [www.CommonwealthGames.org](http://www.CommonwealthGames.org)



Proceeds benefit:

**alzheimer's association®**

**Register me for the following:**

Central & Western Virginia Chapter

- Ten Miler** \$30 entry fee till midnight of October 20<sup>th</sup> (\$40 Oct 21<sup>st</sup> and after)
- Four Miler** \$25 entry fee till midnight of October 20<sup>th</sup> (\$35 Oct 21<sup>st</sup> and after)
- Family/Group Rate:** 3 or more participants - \$ 17.00 each. Entry Forms MUST be MAILED in together. This rate is only good for mail in registrations received by October 20<sup>th</sup>.

**T-shirt size:** Adult S          Adult M          Adult L          Adult XL  
Adult XXL (Please add \$2 for XXL)

**Race presented by:**



*Independent Living • Assisted Living  
Memory Care • Respite Care*

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Birth date:** \_\_\_\_\_ **Age on Race Day:** \_\_\_\_\_

**Method of payment will be the following:**

**Check enclosed.** Make check payable to: VAS

**Please charge my credit card.**



Card# \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name on card: \_\_\_\_\_ CVV Code: \_\_\_\_\_

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

**Roanoke's  
only 10 Miler!**

**Please do not send cash (unless exact amount). Entry fee is non-refundable and non-transferable.  
One application per entry.**

**Mail to:**

Virginia Amateur Sports

711-C 5th Street NE

Roanoke, VA 24016

**WAIVER - a signature and date are required.**

PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT, WAIVER AND RELEASE FROM LIABILITY.

**Questions? Call VAS at 540.343.0987**

I acknowledge that the Memory Miler is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN THE GREENWAY MEMORY MILER. I certify that I am physically fit, have sufficiently trained for participation in this event, and have not been advised against participation by a qualified health professional. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns, or anyone else who might claim or sue on my behalf, and I expressly acknowledge that it is my intent to take these actions: (a) I AGREE to abide by the Competitive Rules adopted by Virginia Amateur Sports, (b) I AGREE that prior to participating in an event I will inspect the race course, facilities, equipment, and areas to be used and if I believe any are unsafe I will immediately advise the person supervising the event activity facility or area; (c) I WAIVE, RELEASE, AND DISCHARGE from any and all claims, losses, or liabilities for death, personal injury, partial or permanent disability, property damage, medical or hospital bills, theft, or damage of any kind, including economic losses, which may in the future arise out of or relate to my participation in or my traveling to and from the Memory Miler. THE FOLLOWING PERSONS OR ENTITIES: EVENT SPONSORS, RACE DIRECTORS, EVENT PRODUCERS, VOLUNTEERS, THE STATE, COUNTY, OR LOCALITY IN WHICH THE EVENT OR SEGMENTS OF THE EVENT ARE HELD, AND THE OFFICERS, DIRECTORS, EMPLOYEES, REPRESENTATIVES AND AGENTS OF ANY OF THE ABOVE, EVEN IF SUCH CLAIMS, LOSSES, OR LIABILITIES ARE CAUSED BY THE NEGLIGENT ACTS OR OMISSIONS OF ANY OTHER PERSON OR ENTITY; (d) I ACKNOWLEDGE that there may be traffic or persons on the course route, and I ASSUME THE RISK OF RUNNING OR PARTICIPATING IN ANY OTHER EVENT. I also ASSUME ANY AND ALL OTHER RISKS associated with participating in the VAS sponsored event including but not limited to falls, contact and/or effects with other participants, effects of weather including heat and/or humidity, defective equipment, the condition of the roads, water hazards, and any hazard that may be posed by spectators or volunteers, all such risks being known and appreciated by me, and I further acknowledge that these risks include risks that may be the result of all negligence of the persons or entities mentioned above in paragraph (c) or of other persons or entities; (e) I AGREE NOT TO SUE any of the persons or entities mentioned above in paragraph (c) from any and all claims made or liabilities that I have waived, released, or discharged herein; (f) INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above in paragraph (c) from any and all claims made or liabilities assessed against them as a result of (i) my actions or inactions, (ii) the actions, inactions or negligence of others including those parties hereby indemnified; (iii) the conditions of the facilities, equipment, or areas where the event or activity is being conducted; (iv) the Competitive Rules; or (v) any other harm caused by an occurrence related to a VAS event; and (g) I GRANT PERMISSION for the use of my name and/or likeness relating to my participation in a VAS event, and I WAIVE all right to any future compensation to which I may otherwise be entitled as a result of the use of my name or likeness. I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OR OLDER FOR THE Memory Miler, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS. **NO REFUNDS.**

**Signature of Runner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent or Guardian if entrant is under 18:** \_\_\_\_\_ **Date:** \_\_\_\_\_

