



DEC. 16th 6:00pm (please arrive by 5:00pm)
1735 Jackson St Fort Myers, FL 33901
(239) 785-3286
Crossoverchange@gmail.com

COST: \$30 / Race Day \$40

* First name

* Last name

* Gender

Male

Female

Run or Walk

* Date of birth

Email address

* Day phone

 Ext.

* Country

* Address

Address line 2

* City

* State / Province /
Region

* ZIP / Postal code

Emergency contact
name

Emergency contact
phone

How did you hear
about this event?

First 250 racers will
receive a t-shirt and
necklaces.



PACKET PICK UP WILL TAKE
PLACE ON FRIDAY DEC. 15TH,
10:00AM-5:00PM AT THE
RUN SHOPPE FORT MYERS.
RACE DAY PACKET PICK UP
WILL BE AVAILABLE. PLEASE
CHECK
[WWW.DOWNTOWNCHRISTMAS
RUN.COM](http://WWW.DOWNTOWNCHRISTMASRUN.COM) FOR FURTHER
INFORMATION.

Checks made payable to:
CITYGATE MINISTRIES

MAIL TO: Matt Richard 1735
Jackson St, Fort Myers, FL
33901

WAIVER AND RELEASE

I, the undersigned, for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages, death personal injury or loss of property against City gate Ministries, collectively known as the "Owners" of Fort Myers Baptist Church, its offices, directors, employees, related companies, agents, sponsors, officials, volunteers, or representatives, which may arise from my presence at the property know as Citygate Ministries, owned and located in Fort Myers, Florida, even if caused in part by negligence or negligent actions or omissions or other fault of the parties or persons I am releasing, or by the dangerous or defective condition of any property or equipment owned, maintained or controlled by them.

I enter Citygate Ministries at my own risk, and all of the activities that I take part in on Citygate Ministries are done at my own risk.

I attest that I am physically fit and sufficiently trained for the activities that I will take part in on Citygate Ministries.

I also give permission for the free use of my name and picture in any broadcast, telecast or written account of this event.

I fully understand I am forever giving up in advance any rights to sue or make claims against the parties I am releasing if I suffer injuries and damages, even though I do not know the extent of those injuries and damages, and I am voluntarily assuming the risk of such injuries and damages.

I will assume my own medical and emergency expenses in the event of an accident or other incapacity or injury resulting from or occurring related to my attendance at, participation in or observation of the activities at Citygate Ministries./

This waiver and release is given as an inducement to Owner to allow me to enter the property for the purpose of Downtown Christmas Run and Walk at Citygate Ministries ON December 16th, 2017

I have read and understand everything written above and I voluntarily sign this agreement.

Signature _____

Print Name _____

Date _____