

RUNNER TO RUNNER TRANSFER FORM

ORIGINAL RUNNER DETAILS

NAME:

DISTANCE

- 6km
- Half Saturday
- Mountain Dash
- Half Sunday
- Marathon

OFFICE INFO
REMOVE THIS RUNNER
FROM THE DATABASE

BIB NUMBER:

NEW RUNNER DETAILS

NEW BIB #

FIRST

LAST

DOB

FORMAT: 15/03/1973

CONTEST

SEX:

- 6km
- Half Saturday
- Mountain Dash
- Half Sunday
- Marathon

\$25 TRANSFER FEE. CASH ONLY. TICK WHEN PAID.

ENTRY FORM – GWTM 2016

PERSONAL INFORMATION	
Name:	Age:
Email:	
Address:	Phone:
Emergency Contact:	Emergency Contact Phone:

MEDICAL QUESTIONNAIRE
Do you have any medical conditions we should be aware of?
Have you been hospitalised in the last 5 years? If yes, why?
Are you on any current medications?
Is there anything else we should know so we can treat you if needed?

WAIVER	
<p>I understand that participating in the Mountain Sports Glow Worm Trail event is potentially hazardous and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident that may occur during the event or while I am on the precincts of the event. I also am aware of and assume all risks associated with participating in the event, including but not limited to falls, contact with other participants, effects of weather, traffic and conditions of the road/trail. I, for myself and my heirs and executors, hereby waive, release and forever discharge the event organisers, sponsors, promoters and each of their agents, representatives, successors and assigns and all other persons associated with the event, for all my liabilities, claims, actions or damages that I may have against them arising out of or in any way connected with my attendance at and participation in the event. I also agree to follow and obey all instructions and directions given by officials, marshals, members of the police, emergency or rescue staff, I understand that this waiver includes any claims with a cause by negligence, the action or inaction of any of the above parties, or otherwise.</p> <p>I hereby grant full permission to any and all of the above parties to use any photographs, video tapes, motion pictures, website images, recordings, and any other record of this event. I understand that in the event that the event course is, in the opinion of the event organisers, unsafe (for example by reason of heavy rain, high winds, bushfires, "acts of god"), organisers may, in their sole discretion, attempt to re-route the course, find an alternative or shortened course or cancel the event. Organisers also reserve the right to cancel, re-route or shorten the event for any other reason which may include but is not limited to environmental considerations, terrorism and war. If the event is cancelled, re-routed or shortened, no refund will be made. Due to the scale of the event and travel & commitment involved by competitors, it may not be practical to re-schedule the event to any other weekend. I understand I need to carry the mandatory gear to be able to compete in the Glow Worm Trail Running Event.</p>	
Runners Signature:	Date:
Parents name (if signing for Under 18 years)	Childs Name
Parents Signature	Date: