

*Additional consent form required by Watkins Glen International.

Saturday, November 4, 2023

Check-in: 7:00 AM | Race Start: 8:00 AM

3.4 Mile Run/Walk or 1 Mile "Pit Road" Walk at Watkins Glen International, 2790 County Route 16, Watkins Glen

This charity event benefits The Arc of Chemung-Schuyler, a non-profit organization providing supports and services to people with intellectual and developmental disabilities and autism.

CARD HOLDER SIGNATURE

REGISTER ONLINE at www.ArcGrandPrixRun.org INFO: 607.734.6151 - THIS IS A RAIN OR SHINE EVENT!

PARTICIPANT INF (Complete a separate form for			REGISTRATION FEES
			EARLY REGISTRATION (preferred)
FIRST NAME	LAST N	AME	All early registration paid entries include event t-shirt.
STREET ADDRESS			NOW THROUGH APRIL 30, 2023 O Adult (13+) \$25 O Youth (5-12) \$15
CITY	ST	ZIP	O Youth (5-12)\$15
PHONE	EMAIL		PRICE INCREASE ON MAY 1, 2023 O Adult (13+) \$30 O Youth (5-12) \$15
DATE OF BIRTH: MO/DY/YR	CHECK ONE: GENDER:	OMale OFemale	
TEAM NAME (OPTIONAL)			LATE / DAY OF EVENT REGISTRATION T-shirt availability is limited and sizes not guaranteed.
CHECK ONE: O 3.4 Mile O Pit Road	Walk (1 mile, not timed)		AFTER OCTOBER 1, 2023
As a participant in The Arc Grand Prix Run and Walk event, I, for myself, my executor, administrators, heirs, devises and assigns, do hereby agree to hold harmless The Arc of Chemung-Schuyler (Chemung-Schuyler Counties Chapter of The Arc New York, Inc.), Watkins Glen International and its parent, their management, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or their representatives, or their successors from all costs and liability arising out of my participation. I hereby waive all my claims for damage, loss, or theft to my person or property, including, but not limited to, illness, death, and serious injury, that I may have against The Arc of Chemung-Schuyler (Chemung-Schuyler Counties Chapter of The Arc New York, Inc.), Watkins Glen International and its parent, their management, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or their representatives, or their successors which may be caused directly or indirectly from my participation and hereby assume liability for any loss, damage, or other liability. I give my full permission for first aid or medical attention as deemed necessary to be provided to me on the premises or to transport me to a hospital for further treatment should I be involved in any accident or health-damaging situation or should I require a form of medical treatment. I hereby attest that I am in proper health and physical condition to participate and assume all risks of participation in this event. I agree to respect the property at Watkins Glen International. I hereby grant full permission to use my name, results, and any photographs, videotapes, recordings, or any other record of this event for promotional purposes. I have read the above release and agree to the terms.			T-SHIRT SIZE (Adult S,M,L,XL,2X,3X or Youth S,M,L) PAYMENT INFORMATION Online: www.ArcGrandPrixRun.org Mail-in: Mail completed application & payment to The Arc of Chemung-Schuyler, 711 Sullivan Street, Elmira, NY 14901
Participant Name (please print): Date:			Chemung-Schuyler
Parent or Guardian Waiver for minors (under 18 years old), if applicable.* The undersigned parent/legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to indemnify and hold harmless The Arc of Chemung-Schuyler (Chemung-Schuyler Counties Chapter of The Arc New York, Inc.), Watkins Glen International and its parent, their management, and each of their respective officers, board members, employees, volunteers, sponsors, organizers or representatives and their successors from all liability, loss, or damages which may be imposed upon said parties because of any defect in or lack of capacity to act and release said parties on behalf of the minor and the parents or legal guardian. Minors waiver only accepted with parent or guardian's signature.			 Walk-in: Cash/Check/Card Accepted at The Arc of Chemung-Schuyler 711 Sullivan Street, Elmira—or—203 12th Street, Watkins Glen Credit Card: I authorize the use of my Visa, MasterCard, Discover, or AmEx account. NAME AS IT APPEARS ON CARD
Name of Minor:		Date:	CREDIT CARD #
Signature of Minor:			EXP. DATE SEC. CODE
Parent or Guardian Signature: _			LAI. DAIL SEC. CODE