



**NSU Running Hawks Resilience Run 5K and Fun Run**  
**April 13, 2019**  
**Registration Form**

First/Last Name: \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Registration fee: \$10 in advance, \$15 on-site\* Payment method:  Cash  Check # \_\_\_\_\_

*\*must register by April 1st to receive t-shirt. Make checks payable to Northeastern State University*

**T-Shirt Size:**  Small  Medium  Large  Extra Large

**Race will begin and end at the Centennial Plaza on the NSU campus (Sequoyah Statue in front of Seminary Hall). Check in begins at 8:00 am. Race will start at 9:00 am.**

**Participant Waiver of Liability**

I know that running is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but no limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the I understand that bicycles, skateboards, baby joggers, roller skates or roller blades, animals, and personal music players are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Northeastern State University, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

Printed Name \_\_\_\_\_ Signature: \_\_\_\_\_

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

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

For information, contact the Running Hawks Advisor, Sara Barnett at 918.444.4350 or at [barnet11@nsuok.edu](mailto:barnet11@nsuok.edu).  
**Return registration and payment to NSU Center for Tribal Studies (320 Academy St.).**