



BEAT THE HEAT / 3K Run/Walk

2nd Wednesday of The Month at 12:30 PM

1010 Travis Place 8th Floor

For more info contact Jennifer Doctorovich, General Manager at 281.962.4066 or www.HCTRAVISPLACE.com.

Race course runs on the indoor track, 5.5 laps per mile. Lockers and shower facilities are available for members and guests.

PRIZES!

Both male & female winners in each age group **receive a winner's ribbon**

Age Groups

18-35; 36-45; 46-56; 57-68; 68 & over

REGISTRATION FORM

CHECK ONE: 3K (2 Miles) RUN/WALK _____

**Walkers please use the outside lane closest to street.*

Name: _____ Place: _____ Time: _____

Address: _____ City/State/Zip _____

Email: _____

Phone: _____ Age: _____ Gender (circle): M F

Race entry \$10.00 Non-Member Guest

Total entry \$0.00 Member

Make checks payable to: Health Club At Travis Place

WAIVER AND RELEASE. PARTICIPANTS, PLEASE READ THIS CAREFULLY AND SIGN.

In consideration of being allowed to participate in any way in Health Club At Travis Place 3K run/walk, I, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this event is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Travis Place Health Club, L.P., their owner, officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name Signature: _____ DATE: _____