

**ENTRY FORM**  
**5K FUN RUN/WALK (13 Apr 04, 0800 hours)**

Registration: 0715 hours

**Return to the Family Advocacy Program office, located at the Community Center on the corner of Knox and Randolph Street, Bldg. # 1-3774 (Phone: 396-5521/4175)**

NAME: \_\_\_\_\_ Male / Female (Circle One) Age: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_ UNIT: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

STATUS (Circle One): Active Duty Family Member Retiree DoD Civilian Other

EMERGENCY CONTACT (Name/Number): \_\_\_\_\_

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**RELEASE OF LIABILITY**  
Data Required by the Privacy Act of 1974

Prescribing Directive: 10 USC 2733, 28 USC 2671-2680, AR 27-20

Authority: Title 10, USC 3012. Principal Purposes: To release the United States Government, Department of the Army, XVIII Airborne Corps, Fort Bragg, and the agents and employees thereof from any and all liability arising from or incident to participation in the ACS 5k Fun Run/Walk.

Mandatory or Voluntary Disclosure and Effect on Individual Not Providing Information: Voluntary; however, if information is not provided, participation in the ACS 5K Fun Run/Walk may be denied.

In consideration of the permission extended to me by the United States, through its agents, to participate in the ACS 5k Fun Run/Walk, I agree to release and hold harmless in the United States Government, the United States Army, Fort Bragg and the agents and employees thereof from any and all liability for personal injury, death, property damage or loss, or any other loss resulting from or arising out of my participation in the ACS 5k Fun Run/Walk on Fort Bragg, North Carolina.

Participation in the ACS 5k Fun Run/Walk includes, but is not limited to the risk of death or serious injury such as cuts, scrapes and bruises, broken bones, twisted ankles, sprains, pulled or strained muscles, knee and other joint injury, heart attack, and stress-related injury resulting from: the risks/hazards of running and physical exertion over a prolonged period, exposure to heat and cold, dehydration, running and walking on uneven sidewalks and streets, being hit by a car or other vehicle, colliding with other participants, falling and tripping, or the conduct of other participants, including their negligence or willful misconduct.

I certify that I will abide by all safety rules and the direction of the ACS 5k Fun Run/Walk Supervisors. I further acknowledge that failure to abide by all safety rules and the direction of the ACS 5k Fun Run/Walk Supervisors may result in my being disqualified from participating in the ACS 5k Fun Run/Walk on Fort Bragg.

I also agree to release the United States and the United States Army from any and all liabilities, claims and causes of action, based on or arising from negligence or gross negligence on the part of the United States Army, Fort Bragg, and its agents and employees.

I acknowledge that I have read and understand the provisions of this release and understand that it is binding upon myself and my assigns, heirs, executors, beneficiaries, family members, and derivative claimants. I further acknowledge that I have no medical history or condition that would preclude me from participating in the ACS 5k Fun Run/Walk on Fort Bragg.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Participant

\_\_\_\_\_  
Signature of Participant

*Complete by parent/guardian if participant is under age 18*

\_\_\_\_\_  
*Printed Name of Parent/Guardian*

\_\_\_\_\_  
*Signature of Minor's Parent/Guardian*

\_\_\_\_\_  
*Printed Name of Child*