

Team Heart and Sole Teammate Application

Mail completed application to: Teammate Coordinators P.O. Box 401 Worthington, OH 43085

Or email to: teamheartsole@gmail.com

Dear Teammate Applicant:

Team Heart and Sole Board

Thank you,

Thank you very much for your interest in becoming a Teammate. Teammates are a vital part in providing a rewarding race experience for our Champions and their families. We will enter your contact information on Constant Contact and you will receive emails regarding our events. Some events require Teammates to register and pay the race directly, usually only the half marathons. Most do not. The email for each event will set out the registration and payment details. Please visit our website at www.teamheartsole.org for more info and updates.

Name: _____ Address: City: ______ State: _____ Zip: _____ Phone: _____ Email: _____ Birth Date: _____ Preferred Pace: _____ (Must be at least 16 years old) **Emergency Contact:** Name: _____Phone Number: _____ T-Shirt Size (check one) S M L XL XXL By signing I acknowledge my understanding that my participating in any Team Heart and Sole event and/or any pre- or post event activities (collectively, the "Event") involves rigorous physical activity and that it potentially may be hazardous. I attest and verify that I am physically fit and have sufficiently trained for the Event and that, if appropriate, my physical fitness to participate in the Event has been verified by a licensed medical doctor. I expressly assume all known and unknown risks associated with the Event, including but not limited to: loss of or damage to my property; injury (including death); accidents; the effects of weather; and terrain conditions that may be vary widely, and that may include uneven and/or slippery surfaces, spectators, participants and natural and manmade obstacles (including without limitation, vehicles, security barriers, signs, cables, mats and debris on the course). In consideration of my participation in the Event, I, for myself, my heirs, executors, administrators, personal representatives, successors and assigns, waive any and all rights, claims and causes of action I have or may have against any Race Organizer that may arise as result of my participation in the Event. For these purposes, a "Race Organizer" is any one or more of the following: Team Heart and Sole and their affiliates; all governmental agencies representing the territory in which the Event will be held; all sponsors, agents, vendors, and contractors of or for the Event; medical service providers; and the officers, directors employees, representative, successors and assigns of each of the foregoing. I hereby agree to indemnify all Race Organizers for all claims and losses (including attorney's fees and court costs), which may be brought against any one or more of them by anyone claiming to have been injured or otherwise to have suffered loss or damage as a result of my participation in the Event. I acknowledge and agree to abide by any Official Rules for the Event that may be posted at the Event or on the Event's website. I hereby represent and warrant that I am 18 years of age or older or, if applicable, that I am the parent or legal guardian of the child under the age of 18 years old who I am registering for the Event and that I have the full power and authority to agree to these terms on behalf of such child, and to bind him/her to these terms. Signature of Athlete ____ ___ Date _____ Signature of Parent Guardian (if under 18 years of age) _ Date _____