

DOGTOWN TRAIL RUN

5 MILES

TO BENEFIT CAPE ANN TRAIL STEWARDS:

Help us preserve and maintain the unique and beautiful trails on Cape Ann!

Sunday, May 19, 2019
9AM Start

Parking located at the O' Maley Middle School, 32 Cherry Street, Gloucester, MA.

Your race entry earns you a 1-year membership to Cape Ann Trail Stewards, a t-shirt (if you register by April 15) and 100% of your tax deductible donation goes back into the trails on Cape Ann.

\$25 pre-registration

\$30 race day

Please send membership fees and completed registration forms payable to:

Cape Ann Trail Stewards, PO Box 690 Essex, MA 01929.

Email: contact@capeanntrailstewards.org | Phone: (978) 968-4109 | website: www.capeanntrailstewards.org

First Name: _____ Last Name: _____

Email: _____

Age: _____ Birthdate (mm/dd/yy): _____ Gender: M ___ F ___ T-shirt size: S M L XL

Street Address: _____

City: _____ State: _____ Zip: _____

CITY OF GLOUCESTER RECREATIONAL ASSUMPTION OF RISK, RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT:
I, the undersigned do hereby consent to my participation in voluntary or recreation programs of the City of Gloucester, understand that such activities may include use of tools, heavy exertion and other physical activities that could cause personal injuries, property damage or even result in death. I represent that I am qualified and in good health and proper physical condition to participate in such activities. I acknowledge that such activities may take place in areas that have hazards and that if I believe any conditions to be unsafe, I will immediately discontinue participation in such activity.

I also agree to forever release the City of Gloucester and all its employees, agents, site contractors, volunteers and any and all individuals, government agencies and organizations assisting or participating in any voluntary or recreation programs of the City of Gloucester ("the Releasees") from any and all claims, rights of action and cases of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries or death to myself or property damage resulting from my participation in the City of Gloucester voluntary activities or recreation programs.

I also promise not to sue and to indemnify, defend, and hold harmless the Releasees against any liability and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to myself or property damage resulting from participation in the City of Gloucester. voluntary activities or recreation programs including payment of litigation expenses and attorneys fees. I further agree that if anyone sues on my behalf, I will also indemnify, defend and hold harmless the Releasees against any and all such liability and legal claims including litigation expenses and attorney fees.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my participation is voluntary and that I am free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to participate in the City of Gloucester's activities. as a volunteer or in its recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage that I may suffer in voluntary activities of the City of Gloucester or recreation programs.

Signature: _____ Date: _____

Parent signature for participants under 18 _____