



2019
Armed Forces Kids Run
Friday, May 17



Child's First Name: _____ Child's Last Name: _____
Home Address: _____
Phone Number: _____ Email Address: _____
Child's Age: _____ Child's T-Shirt Size: (Circle One) YS YM YL AS AM AL AXL

Your child will be participating in the race according to their age. Please circle/highlight the appropriate race your child will be participating in.

1/2 Mile (5-7 year olds)

Check In Time: 1630-1730
Event Start Time: 1800
(please be on location by 1745)
Location: Fort Bliss Youth Sports Plex
195 Chaffee Road

1 Mile (8-11 year olds)

Check In Time: 1630-1800
Event Start Time: 1830
Location: Fort Bliss Youth Sports Plex
195 Chaffee Road

5K (12-18 year olds)

Check In Time: 1630-1800
Event Start Time: 1815
Location: Fort Bliss Youth Sports Plex
195 Chaffee Road

WAIVER- PARENTS PLEASE READ & SIGN BELOW

I know that running a race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in the CYS Youth Sports Runs including, but not limited to; falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release CYS Youth Sports, organizers, and all volunteers associated with the CYS Youth Sports Run, sponsors, their representatives, event organizers, and their representatives and successors from all claims and liabilities of any kind arising out of participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature (18 or older): _____
Printed Name: _____
Parent's Signature: _____
Parent's Printed Name: _____

Date: _____
Date: _____

