



market to market relay.

Presented by Nebraska Orthopaedic Hospital

Team Waiver and Running Order

WAIVER: I understand that I am to avoid all risks, and wait for vehicle traffic and trains to pass. I am in suitable condition to run this event and I assume all risks including, but not limited to , the hazards of slips and falls, animal attacks, motor vehicles, adverse weather, bad footing, dehydration, bad companions, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators, or anyone acting for or on my behalf, covenant not to sue, and release the Race Committee, all cities and police departments with jurisdiction over the route, Great Plains Trails Network, Eastern Nebraska Trails Network event volunteers, and any and all sponsors including their agents, employees, assigns or anyone acting for on behalf of the above, from any and all claims of liability for death, personal injury, or property damage of any kind or nature arising out of my participation in this event. This release and waiver extends to risks and claims of all kinds.

***** Turn this waiver in at Packet Pick-up**

Team Name _____

Team Captain

Team Members	Name (print name)	Signature
Runner 1		
Runner 2		
Runner 3		
Runner 4		
Runner 5		
Runner 6		
Runner 7		
Runner 8		

City: _____ State: _____

Message to the fans: _____

