



2025 Race the Reserve

HALF MARATHON 10K 5K REGISTRATION FORM

August 9, 2025

Only one participant per entry form

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DoB: _____ AGE on RACE DAY: _____ SEX: _____ EMAIL: _____

T-Shirt Size: S M L XL 2XL

Shirts cannot be guaranteed if registration or postmark date is later than July 20, 2024.

Mail-in entries must be postmarked by **July 26, 2025**.

Event Registration Fees – Please circle the race you wish to participate in below.

Half Marathon:

- Early Bird: Now through June 1 - \$65
- June 2 through June 30 - \$75
- July 1 through August 10 - \$85

10K Run/Walk:

- Early Bird: Now through June 1 - \$40
- June 2 through June 30 - \$45
- July 1 through August 10 - \$50

5K Run/Walk - Early Bird:

- Now through June 1- \$30
- June 2 through June 30 - \$35
- July 1 through August 10 - \$40

Please make checks payable to **CHS Parents**. *Specify Class of 2026 on memo line.*

Participants must read and sign Waiver and Release on the reverse side of the registration form.

Mail completed application, signed waiver and remittance to:

Parents of CHS

PO Box 1212

COUPEVILLE, WA 98239

Pick up packets on the day of the race, beginning at 6:30AM, at:

Coupeville Elementary School, 6 S. Main St., Coupeville, WA

**RACE THE RESERVE WHIDBEY ISLAND 2025
HALF MARATHON 10K 5K**

WAIVER AND RELEASE

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

WAIVER: I know that running or walking a road race, regardless of distance, is a potentially hazardous activity. I should not enter, participate, walk or 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/walk and I further agree that race officials may authorize necessary emergency treatment for me. I understand that police protection will not be provided. I assume all risks associated with running/walking this event, including, but not limited to, illness, travel to and from the event, tripping and falling, contact with other participants, spectators or objects on or near the course path, the effects of weather, including temperature and humidity, vehicle and pedestrian traffic and the surface conditions of the roads and unpaved trails, all such risks being known and appreciated by me.

Having read this waiver and knowing these facts and in consideration of acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release Race the Reserve Whidbey Island 2025, CHS Parents – Class of 2026, CHS Parents, Coupeville School District #204, BuDu Racing, LLC, USATF, the Town of Coupeville, Island County, race officials, all sponsors, contractors and volunteers, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my email address, post my name and race results, use any photographs, motion pictures, recordings, or any other record of this event, for any legitimate purpose. I understand that my entry fee is non-refundable. A parent must sign if the entrant is under 18 years of age. This is to certify that my child has permission to compete in the event and is in good physical condition and I agree that event officials may authorize necessary medical treatment. I understand that bicycles, skateboards, roller skates or blades, and animals are not allowed in the race and I will abide by these guidelines.

I understand and agree to the waiver and release.

Name: _____

Signature: _____

Parent/Guardian Signature (if under 18): _____

Happy Running!!!



PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Bib # _____

Event Name: _____

Event Date(s): _____

Event Location: _____

Sanction #: _____

For and in consideration of USA Track & Field, Inc. ("USA Track & Field" or "USATF") allowing me, the registrant, to participate in the USA Track & Field sanctioned event I am registering for herein (the "Event" or "Events"); I, for myself, and on behalf of my spouse, children, guardians, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

- 1. I hereby represent that (i) I am at least eighteen (18) years of age... (ii) I am in good health... (iii) I am not under the influence of alcohol...
2. I understand and acknowledge that participation in track & field, road running, race walking, cross country, mountain, ultra, and trail running Events is inherently dangerous...
3. I agree to be familiar with and to abide by the Rules and Regulations established for the Event...
4. I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless the following parties...
5. As a condition of my participation in the Event, I hereby grant USA Track & Field, the event director and host organization a limited license to use my name, likeness, image, photograph, voice, video, athletic performance, biographical and other information...

I hereby warrant that I (or the Guardian, if I am under the age of 18) am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by accepting it...

If the participant is under the age of 18, the Guardian hereby agrees to release and discharge the Released Parties as follows: a) The Guardian acknowledges and understands that the Event is inherently dangerous... b) The Guardian acknowledges the rights waived by both the Guardian and the participant... c) The Guardian acknowledges that the Guardian will indemnify the Released Parties from any and all Liability...

Participant Name (or Guardian): _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #1: _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #2: _____ Age: _____ Date of Birth: ____/____/____ Male Female
Minor Name #3: _____ Age: _____ Date of Birth: ____/____/____ Male Female

Home Address: _____ Home Tel.: (____) _____
Team Name _____ Email Address _____

X _____ / _____ / _____
Signature of Participant or Guardian Date Signed