

Revere City Wide



Revere City Wide Fitness Challenge & 5K Road Race

Fitness Challenge

Daily May 12th - June 6th

Road Race

Saturday, June 7, 2014 9:00 a.m.

WHAT: Fitness classes & professionally timed 5k run/walk.

WHERE: Fitness challenge classes will be held at Beachmont School, 15 Everard Street, Revere. (Class schedule and waiver are listed on the back of this form)

Road race starts at the A.C. Whelan Elementary School, 107 Newhall Street, Revere, MA.

ENTRY FEE: Fitness Challenge Registration is Free!! **Road Race Pre-registration \$20.00, RPS Students \$15.00**, Race day registration - **\$25.00** (cash only) from 7:30-8:30 a.m. Registration closes at 8:30AM! A portion of registration fees will be used to create scholarships for RHS seniors.

PRIZES: Prizes for top male and female winners as well as top 3 male and female runners in each age division for road race. Awards for fitness challenge also!

TSHIRTS: First 250 runners and walkers who register for race will receive a T-shirt

Register On line-By mail-In person

Fitness Challenge Online Registration <https://www.smartwaiver.com/w/530f52ffe8988/web/>

Revere Runs 5K Online Registration

http://www.NorthShoreTimingOnline.com/reglivecb.aspx?eventyear_id=154

Mail paper registration plus fee for 5K Race to: **Revere City Hall/Attention Debbie West, 281 Broadway, Revere, MA 02151. Checks should be made payable to the City of Revere**

Register in person at the Beachmont School during fitness classes for the fitness challenge & 5K Race

For more information please email: acosta02151@comcast.net or Julie_demauro@hotmail.com

NAME _____

ADDRESS: _____ EMAIL: _____

PHONE: _____ T-Shirt Size Gender Specific (first 200) S ___ M ___ L ___ XL ___

EMERGENCY CONTACT NAME _____ EMERGENCY CONTACT PHONE: _____

WALK ___ RUN ___ GENDER ___ AGE ON RACE DAY ___

I know that running a road race is a potentially hazardous activity and that I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the run/walk. I assume all risks associated with running in this event including, but not limited to falls, contact with other participants, and effects of the weather including heat and/or humidity, lightning, and extreme cold, traffic and the conditions of the road 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 the City of Revere and all sponsors and event volunteers, their representatives and successors from all claims of liabilities of any kind arising out of my participation in this event or carelessness on the part of the persons named in this waiver. Further, I grant permission to all the foregoing to use my name and images of myself in any photographs, motion pictures, results, publications or any other print, video graphic or electronic record of this event for legitimate purposes.



Signature If under 18, parent or guardian



Revere City Wide Fitness Challenge Entry Form

RELEASE -Waiver of Liability and Informed Consent – **Complete and mail to: Revere City Hall/Attention Debbie West, 281 Broadway, Revere, MA 02151.** I _____, _____, have enrolled and agreed to voluntarily participate in Revere’s City Wide Fitness Challenge of physical activity including, but not limited to, the following activities: boot camp, cardio classes, Zumba dancing, kickboxing, walking, jogging, etc.” “Acknowledgment is hereby made that I am in good physical condition and that the activities of the City Wide Fitness Challenge have risks including, but not limited to, those caused by terrain, temperature, weather, my physical condition, equipment, and actions of others.” “In consideration of my participation in the City Wide Fitness Challenge, I, _____ for myself, my heirs and assigns, hereby release: **City of Revere, MA and all participating businesses and instructors** from any claims, demands and causes of action arising from my participation in the City Wide Fitness Challenge.” “I fully understand that I may injure myself as a result of my participation in the City Wide Fitness Challenge and I, _____, agree to assume all risks and hereby release above businesses from any liability now or in the future including but not limited to heart attack, nausea, joint or muscle injury, broken bones, heat-related illness, and/or difficulty breathing occurring during or after my participation in the City Wide Fitness Challenge. I hereby state that I will inform the instructors of above businesses of any symptoms during my participation in the City Wide Fitness Challenge for my safety and benefit.” I, _____ understand that above businesses may photograph or record video of participants in the Fitness Challenge and I, _____, provide approval for them to use these pictures or videos for promotional purposes only.

Print Name: _____

EMAIL: _____

Address: _____

PHONE: _____

EMERGENCY CONTACT NAME and PHONE: _____

ONLY COMPLETE BELOW SECTION IF YOU ARE A PARENT OR GUARDIAN OF A PARTICIPANT UNDER THE AGE OF 18:

I, the parent or guardian of the above named participant, hereby give my approval to this child’s participation in the FREE kids dance and fitness classes and its activities. I assume all risks and hazards incidental to such participation in City Wide Fitness Challenge, and I hereby waive, release, absolve, indemnify, and agree to hold harmless its officers, heirs, assigns, administrators, personal representatives and executors, firms, corporations, businesses, and present employees, owners, volunteers, sponsors, supervisors, participants, all city, county, and state governments, and all sponsors, their representatives and successors and others persons, for any claim arising or of an injury to my/our child and from any and all claims, causes of actions, obligations, lawsuits, charges, complaints, contracts, controversies, covenants, agreements, promises, damages, costs, expenses, responsibilities, of whatsoever kind, nature or description, whether, direct or indirect, in law or in equity, in contract or in tort, or otherwise, whether known or unknown, from all claims or liabilities of any kind arising out of or connected with my child(ren)’s participation in this event. I consent to the foregoing and grant permission for him/her to participate in City Wide Fitness Challenge. I acknowledge I have carefully read, accepted and agreed to the terms on this Release and Liability waiver, and know and understand their contents and I sign the same on my own free act and deed.

Parent Signature _____

Day	Adult Class	Child Class
Monday 6-7 p.m. (no class 5/26)	Basic Self Defense with DJ Traversy	Sports Drills & Conditioning
Tuesday 6-7 p.m.	Zumba w Vanessa Fabro (1 week), Zumba with Deanne Mantia (3 weeks)	Dance with Rachel Ferrante’s Academy of Performing Arts
Wednesday 6-7 p.m.	Boot camp with Millions of Muscles Fitness	Mini Muscles Kids Fitness
Thursday 6-7 p.m.	Aerobics with Greater Boston Fitness	Hip Hop with Candice Borden from Beat ConnXtionz
Friday 6-7 p.m.	Cardio Kickboxing with Revere Karate Academy	Gymnastics with Nikki DiBisceglia from The Studio Dance Complex
Saturday 9:00 All-Ages	Yoga/Stretch with Suzanne Dufresne from Hot Yoga Flow (meet at clock at 9:00am)	Beach Walk/Run
Sunday All- Ages	Walk/Run the URBAN TRAILS	Whelan School - Beachmont School

