Parents’ Weekend 5K Fun Run/Walk

Start: Integration Statue on Woodward Plaza
Finish: The beginning of Legacy Walk South at Woodward Plaza
Course: Hilly 3.1 mile run through the FSU campus

Competition Categories

After the tabulation and verification of race results, plaques will be presented to the first and second male and female finishers, and medallions to all third place finishers in all Age Groups. Thank you for your participation and GOOD LUCK!


Statement of Voluntary Consent, General Release, and Waiver of Liability

In consideration of my/our participation in the 5K Fun Run/Walk, sponsored by Florida State University Parents’ Weekend committee, Saturday, November 4, 2017, 8:00 to 9:30 a.m. on the campus of Florida State University, and for other good and valuable consideration, the participants listed on the registration form, having actual knowledge and conscious appreciation of the dangers, risks, responsibilities, requirement and duties, do hereby expressly and voluntarily consent to participation in the aforementioned activity, knowingly assume the risks arising therefrom, and hereby hold harmless and release and forever discharge Florida State University, the Florida State University Board of Trustees, and the Florida State University Parents’ Weekend Committee and their successors, from any and all claims and demands whatsoever, which we the participants and our heirs, representatives, executors, administrators and personal representatives thereof, or any other persons acting on our behalf, or in behalf of our respective agents, have or may have against the said Florida State University, the Florida State University Board of Trustees, and the Florida State University Parents’ Weekend Committee and their successors, by reason of any accident, illness, injury, property loss or damage, or any other consequences arising or resulting directly or indirectly from my participation in the 5K Fun Run/Walk. Furthermore, I/we understand that neither Florida State University, the Florida State University Board of Trustees, nor the Florida State University Parents’ Weekend Committee has medical or liability insurance to cover me/us in the event of injury, accident, property losses, or other such occurrences during this activity and I/we further specifically release and hold harmless Florida State University, the Florida State University Board of Trustees, and the Florida State University Parents’ Weekend Committee, their agents, employees and personnel from any and all liability connected with this activity and assume risks, liabilities and responsibilities for any and all accidents, injuries and/or property losses arising there from. I/we hereby represent that by reading this statement of Voluntary Consent, General Release and Waiver of Liability, I/we fully understand and acknowledge that I/we am/are relying wholly upon my/our own judgement, belief and knowledge of the circumstances involved in my/our participation, and that I/we have read this statement, understand its contents, and execute it of, my/our own free will and choice.

In Witness Whereof, I have signed this instrument on this _____ day of ______________, 2017, Tallahassee, Leon County, Florida.

Signature: __________________________ Name (Please Print): __________________________ Witness: __________________________

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