

I accept that I compete in this event at my own risk and I hereby waive and release the event, GCXC, Greater Cleveland XC, Second Sole, Second Sole Mentor, and any city or village, sponsor, officer, and member of said organization, their representatives, successors, assigns, and any individuals who are in any way connected with this event from all rights and claims for any accident, injury, or loss suffered as a consequence of my participation.

Signature: ______(Parent or Guardian Signature Required if Under18)

Make checks payable and send to: GCXC Attn: Chili 5K 8791 Mentor Ave. Mentor, OH 44060



