



Benefiting the  
Southampton  
COMPASS  
Coalition



Southampton Public Schools &  
**Community, Parents, Students and Staff**  
(COMPASS)

Hosting the 2<sup>nd</sup> annual  
**COMPASS 5K RUN/WALK**  
Date: Saturday May 24<sup>th</sup>  
Location: Southampton High School  
Time: 9:00am

Entry Fee: 10\$ Adults; 5\$ Children Under 10, Race day Entry 15\$  
\*Awards\* Refreshments\* T-Shirts

Name \_\_\_\_\_

Address \_\_\_\_\_

Age \_\_\_\_\_ D.O.B. \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Signature \_\_\_\_\_

**WAIVER.** I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I assume all risk associated with participating in this event. I fully understand that during this event I am responsible for my own safety and for abiding by all pedestrian and vehicular traffic laws and regulations. I agree to yield to all vehicular traffic and accompany any minors that are in my care at all times. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself and anyone entitled to act for my behalf, waive and release the Southampton Public Schools and COMPASS coalition and all sponsors of the event, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability might arise out of negligence or carelessness on the part of the persons named in this waiver.

I have read the foregoing and certify my agreement by my signature below.

Signature \_\_\_\_\_  
(by parent or guardian if participant is under 18)

Date: \_\_\_\_\_