

Splash of Color Run Team Registration Form

Company Name: _____ Date: _____
 Contact: _____ Hm# _____ Cell/Work# _____ Company
 Address: _____ City _____ Zip _____
 email: _____

In consideration of being permitted to participate in the Livingston Recreation Splash of Color Run, I with the intent of binding myself, my spouse(if any), and my heirs, legal representatives, and assigns, release and discharge the Recreation program sponsors AND PARTNERS, from all injuries or damages, suffered by the INDIVIDUAL while participation in the Splash of Color Run. I understand that in signing this release, I do not exempt or release the City, it's council persons, employees, agents, assigns or the Splash of Color run sponsors from responsibility for any fraud, willful injury or willful or negligent violation of the law committed by any such persons. I further understand that: "The City of Livingston **does not have or provide medical or accident insurance** for persons involved in programs sponsored by the Recreation Department.

TEAM PRICING IS GROUPS OF 10 OR MORE ONLY No Frills/Business Package includes a bandana, sun glasses, and entry to the run, \$18. Deluxe/VIP Package includes event t-shirt, bandana, sun glasses, water, extra color bomb and entry to the run, \$28. Add \$3 for 2X – 4X shirts.

No Frills \$18	Deluxe VIP \$28	Participants Name Print	Participant's Signature	Phone	Shirt size	Amount Paid
		1				
		2				
		3				
		4				
		5				
		6				
		7				
		8				
		9				
		10				

Order Form - Registration Deadline April 15, 2024, Livingston City Hall, 1416 C St.

Total # of Participants _____

No Frills Entry _____ X \$18 = \$ _____

VIP _____ X \$28 = \$ _____

Extra Fee for 2XL and up _____ X \$3 = \$ _____

Amount Due _____



Office use only:

Shirt Totals:

AS _____

AM _____

AL _____

AXL _____

AXXL _____

AXXXL _____

AXXXXL _____

Total Shirts: _____

Amount paid: _____

initials _____ Date _____