

of Western Nebraska serving Box Butte & Dawes Counties





Race begins at 10:30 a.m.

Registration at 10 a.m.

Kníght Museum and Sandhílls Center

Dash or walk 5K at your own pace to support United Way in our 2017 Jingle Bell Dash!

Visit the booths along the way for fun treats or race on through to the finish.

Registration prior to 12	Registration after 12/1				
Adult	\$25	\$30			
Students (under 18)	\$15	\$20			
*Family	\$65	\$75			

Each registration prior to December 1 will receive a t-shirt and race bag with jingle bells! Race bags can be picked up at Box Butte General Hospital from the marketing department on Friday, December 8 or beginning at 10 a.m. the day of the dash.

Registrations after December 1, 2017 cannot be guaranteed a t-shirt or race bag.

*Family registrations should complete a registration from for each family member and return all registrations together with the appropriate registration fee.



Name:										 Arthurshi 		
Addres	s:							_				
City:		State:		Zip:								
Phone:		Email:					_					
T-shirt	Sizes (ple	ase circle 1)										
Youth	S (6-8)	M (10-12)	L (14-16)	Adult	S	М	L	XL	2L	3XL	4XL	

Waiver

By registering and participating in the United Way Jingle Bell Dash you agree to the following waiver. I know and understand that running/walking in a 5K is a potentially hazardous activity. I know, recognize and appreciate these risks, realizing this is a strenuous activity which requires physical conditioning and hereby represent and certify that I am n good health and in physical condition to participate in this event.

I assume all risks associated with running/walking in this and acknowledge it carries with it the potential for death, serious injury, and property loss. I understand the risks include, but are not limited to, those caused by terrain, falls, contact with other participants, lack of hydration, traffic, obstacles, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or administrators of the event. All such related risks being are known and appreciated by me and I assume such and related risks accordingly.

In consideration of the acceptance of my participation, I hereby for myself or anyone else who might claim on my behalf, covenant not sue, and waive, release and discharge all companies involved with the organization, including all sponsors, partners, and affiliates of this event from any and all claims or liability of any kind or nature whatsoever arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the person named in this waiver.

I grant permission to all foregoing to use any photographs, motion pictures, recordings, or any other record of this event for legitimate purposes. I understand that bicycles and skateboards are not allowed in any event. I will abide by these guidelines.

No refunds of entry fees will be given.

*Signed:____

Date: _____

*form must be signed by parent or guardian for participants under 19

Mail completed registrations to United Way P.O. Box 617 Alliance, NE 69301 or drop off at the United Way office (723 Flack Ave). Call 763-8031 for more information.