Join us for the first ever CMS Rainbow Run! Bring your family and friends to run or walk our 2 mile CMS course complete with 4 distinct color stations for a truly unique and fun-filled experience. Proceeds will be donated to the ARC of Middlesex County.

**When:** Friday June 3, 2016 4:30-7:00 PM Race begins at 5:00

**Where:** Colonia Middle School

**Cost:** $15 per participant. Each participant will receive a white t-shirt, sunglasses, temporary tattoos, and a packet of color.

Refreshments will be available for purchase. Tickets for the Dunk Tank and Bouncy House (sponsored by the Colonia Corner) will also be available for purchase.

Each participant will be entered into a drawing for a 4-pack of Somerset Patriot baseball tickets.

For further information please contact Joseph Vitale at joseph.vitale@woodbridge.k12.nj.us or Melissa Kerbis at Melissa.kerbis@woodbridge.k12.nj.us

**Return this form NO LATER than May 19, 2016 to participate and receive your race gear.**

**Please complete a separate form for each participant**

Participant’s Name ____________________________________________________________________________

Shirt size________

Amount enclosed (Can include one check for multiple participants): _____ cash: _____ check:

Please make checks payable to Colonia Middle School.

**Waiver on reverse must be completed in order to participate**
All Participants - Waiver & Release of all claims and assumption of risk

I recognize and acknowledge that there are certain risks of physical injury to participants in Rainbow Run, and I voluntarily and knowingly agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of said participation. I further agree to waive and relinquish all claims I may have (or which may accrue to me) as a result of participating in these activities against Colonia Middle School or the Woodbridge Township School District. Participants registering for the race, programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. I agree that I am solely responsible for determining if I am physically fit and/or skilled for the race or activities contemplated by this Assumption and Release. It is always advisable, especially if the participant is pregnant or disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity. I, for myself and my heirs, do hereby fully release and forever discharge the Administrators from any and all claims for injuries, including death or incapacity, illnesses, damages, expenses or loss that I may suffer arising out of, connected with, or in any way associated with the race, program or activities including injuries caused or associated with transportation to and from the event. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. PARTICIPATION WILL BE DENIED, if I have not signed this waiver before the start of the event.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

Name (Printed) ____________________________________________________________

Name (Signed) __________________________________________________________

Date ___________________

Only complete below if you are a parent or guardian of a participant under the age of 18:

I, the parent or guardian of the above named participant, have read through this waiver and all its terms, and I hereby give my approval to this child's participation in Rainbow Run. I assume all risks and hazards incidental to my child's participation in The Rainbow Run and I hereby waive, release, absolve, indemnify and agree to hold harmless the Administrators, as defined above, for any injury to my child and from any and all claims, causes of actions, obligations, lawsuits, charges, complaints, controversies, covenants, agreements, promises, damages, costs, expenses, responsibilities, of whatsoever kind, nature or description, whether, direct or indirect, in law or in equity, in contract or in tort, or otherwise, whether known or unknown, from all claims or liabilities of any kind arising out of or connected with my child's participation in The Rainbow Run. I consent to the foregoing and grant permission for him/her to participate in The Rainbow Run. I acknowledge I have carefully read, accepted and agreed to the terms on this Assumption and Release and Liability waiver, and know and understand their contents and I sign the same on my own free act and deed.

Child Name (Printed) ____________________________________________________

Parent or Guardian Name (Printed) _______________________________________

Parent or Guardian Name (Signature) _____________________________________

Date ____________________