



Presented by PNC BANK

Presented by Covelli Enterprises and Panera Bread



Panerathon.org

Panerathon Kids Run

Sunday, August 27, 2017 at 11:30am

After the Panerathon 10K/2 Mile Walk/Run
Covelli Centre, Youngstown, OH

Please send completed form by mail to:
3900 East Market Street Warren OH 44484 Attn: Panerathon Kids Run



Open to all children ages 4 through 10. Registration is FREE!

Participant First Name: _____ Participant Last Name: _____

Parent/Guardian First and Last Name: _____

Parent/Guardian Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Age on Race Day: _____ Date of Birth: _____ Sex: M | F

Cell phone (parent that will be onsite for the event in case of emergency): _____

Parents or Groups Team Name: _____



Shirt Size:

Youth Extra-Small (YXS): size 2-4

Youth Small (YS): size 6-8

Youth Medium (YM) size 10-12

Youth Large (YL): size 14-16

Youth Extra-Large: size 18-20

Adult Small

I, (Name of Parent or Guardian) _____, give permission for the participant named above to attend the above mentioned event or activity. I understand the possibility that participation in the above event or activity could include actions or tasks which might be hazardous to the participant named above. I assume all risks associated with participation in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or blades, animals, and headsets of any type are not allowed in the race and I will abide by this guideline. Having read this waiver and knowing these facts, I waive and release the Panerathon, Covelli Enterprises, the city of Youngstown, OH, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

I agree that the minor has my consent to participate in the event. I further provide my consent for the organization or business named above to seek emergency treatment for the minor if necessary. I agree to accept financial responsibility for the costs related to this emergency treatment.

Signature: _____