

**Coon Rapids Firecracker 5k & 10k
Kid's Sparkler Dash Liability Waiver**

Child's Name: _____

Age: _____

Email address: _____

Phone Number: _____

I am entering this event at my own risk or I am signing this release for my child under the age of 18. I understand this release and absolve the Firecracker Race Committee, Coon Rapids Community Strength Foundation, City of Coon Rapids, Anoka County, Anderson Race Management, all sponsors, organizers, volunteers, and associated entities of all blame for any injury, harm, loss, or inconvenience suffered because of participating in this event. Further, I hereby grant permission to all the above-mentioned organizations to use any photographs, videotape recordings and any other record of this event in which I may appear for any legitimate purpose including broadcast of the event, release to media outlets, and in advertising and promotion.

Parent/Guardian's Printed Name

Signature

Date

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