



Hilo Bay 5K

A SALUTE TO OUR VETERANS

VFW Post 3830

RUN/WALK/SUPPORT Registration

Date: July 4, 2024

Time: 7:00 a.m.- 9:00 a.m.

Location: Liliuokalani Gardens Park Hilo, Hawaii

Registration Fee: \$35.00

*Packet pick up will be at Liliuokalani Gardens Park July 2&3 from 12:00 a.m.- 6:00 p.m. and July 4 6:00 a.m.- 6:45 a.m.

VIRTUAL Registration

Date: June 20, 2024- July 3, 2024

You will have 2 weeks to complete the run and log your time.

Registration Fee: \$35.00

Shirts will be mailed to you.

SHIRTS

Please register before May 15, 2024 to be able to pick your shirt size, after that shirt sizes are not guaranteed.

MAILING ADDRESS

Mail forms and payment to: VFW Post 3830 5K Run, PO Box 13 Pahoa, HI 96778

PAYMENT

Make checks and money orders payable to: Veterans of Foreign Wars Post 3830. Payment may be included for more than one person. Please do not send cash.

QUESTIONS

Please contact: VFW Post 3830: 2024vfw38305k@gmail.com

WEBSITE ADDRESS

More information and online registration:

<https://runsignup.com/Race/HI/Hilo/ASalutetoOurVeteransHiloBay5KRunWalk>

Please do not mail after June 20, 2024. Please hand carry registration (or register online) and deliver to the post or the registration team

REGISTRATION FORM

Each adult must fill in and sign their own registration form.

NAME: _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

PHONE NUMBER: _____ **AGE (on race day):** _____

CIRCLE ONE

MALE FEMALE

CIRCLE ONE

RUN WALK SUPPORT VIRTUAL

T-SHIRT Size

CIRCLE ONE

SMALL MEDIUM LARGE XL 2XL 3XL

WAIVER AND RELEASE STATEMENT

I know that running or walking a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including but not limited to: falls, contact with other participants, the effects of weather, including high heat or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release VFW Post & Auxiliary 3830, Pahoa, Hawaii, the County of Hawaii, the State of Hawaii, and all volunteers, independent contractors, and 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 consent to receive medical treatment which may be advisable in the event of illness or injuries suffered by me during this event. I agree to leave the race course within a time limit of two hours. I hereby grant permission to the VFW Post 3830, Pahoa, Hawaii and its sponsors to use all information submitted in my application and any photograph, videotape, motion picture, recording and any other record of this event including race results, my likeness, name and completion time, for any purpose, including pre-race and post-race publicity. By providing my email address, you have my permission to email me with race information, I may unsubscribe by clicking the link in any group email sent.

SIGNATURE (parent or guardian id under 18): _____

EMAIL ADDRESS: _____