

Joint Special Operations 10K Run/5K Fun Walk Official Entry Form

Sponsored by The Special Operations Communicators Association (SOCA)

This event is not officially sanctioned by the US ARMY

☐

10K Runner

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5K Run/Walk

(5K Run/Walk is not
officially timed)

☐

Virtual

PLEASE PRINT CLEARLY

Name: _____ Age on race day: _____ Gender _____

Address: _____

City: _____ State _____ Zip Code _____

Phone: (_____) _____

Do you want your 10K race time text sent to phone ☐ YES ☐ NO

Cell phone carrier if yes above (i.e. AT&T, Verizon, T-Mobile etc...) _____

E-mail address (optional) _____

Are you a DoD ID Card Holder (i.e. military, civilian, DoD contractor etc...) ☐ YES ☐ NO

*Registration Fee (includes t-shirt, calendar, finisher coin, food & drink, raffle ticket)

Adult long-sleeve
T-shirt size

☐ X-Small ☐ Large

☐ Small ☐ X-Large

☐ Medium ☐ XX-Large

Mail entry form and payment NO LATER THAN October 31, 2025 to:

SOCA
P.O. Box 73409
Fort Bragg, NC 28307 - 5002

Make checks payable to “SOCA”
E-mail race questions to: events@thesoca.org

****NO PETS ALLOWED DURING EVENT****

RELEASE OF LIABILITY

Data Required by the Privacy Act of 1974

Prescribing Directive: 10 USC 2733, 28 USC 2671-2680, AR 27-20
Authority: Title 10, USC 3012. Principal Purposes: To release the United States Government, Department of the Army, XVIII Airborne Corps, Fort Bragg, and the agents and employees thereof from any and all liability arising from or incident to participation in the twenty-ninth Annual Joint Special Operations (JSO) 10K Run/5K Walk. Mandatory or Voluntary Disclosure and Effect on Individual Not Providing Information: Voluntary; however, if information is not provided, participation in the twenty-ninth Annual JSO 10K Run/5K Walk may be denied.

In consideration of the permission extended to me by the United States, through its agents, to participate in the twenty-ninth Annual JSO 10K Run/5K Walk, I agree to release and hold harmless in the United States Government, the United States Army, Fort Bragg and the agents and employees thereof from any and all liability for personal injury, death, property damage or loss, or any other loss resulting from or arising out of my participation in the twenty-ninth Annual JSO 10K Run/5K Walk run on Fort Bragg, North Carolina.

Participation in the twenty-ninth Annual JSO 10K Run/5K Walk includes, but is not limited to the risk of death or serious injury such as cuts, scrapes and bruises, broken bones, twisted ankles, sprains, pulled or strained muscles, knee and other joint injury, heart attack, and stress-related injury resulting from: the risks/hazards of running and physical exertion over a prolonged period, exposure to heat and cold, dehydration, running and walking on uneven surfaces, being hit by a car or other vehicle, colliding with other participants, falling and tripping, or the conduct of other participants, including their negligence or willful misconduct.

I certify that I will abide by all safety rules and the direction of the twenty-ninth Annual JSO 10K Run/5K Walk Supervisors. I further acknowledge that failure to abide by all safety rules and the direction of the twenty-ninth Annual JSO 10K Run/5K Walk Supervisors may result in my being disqualified from participating in the twenty-ninth Annual JSO 10K Run/5K Walk on Fort Bragg.

I also agree to release the United States and the United States Army from any and all liabilities, claims and causes of action, based on or arising from negligence or gross negligence on the part of the United States Army, Fort Bragg, and its agents and employees.

I acknowledge by my signature below, that I have read and understand the provisions of this release and understand that it is binding upon myself and my assigns, heirs, executors, beneficiaries, family members, and derivative claimants. I further acknowledge that I have no medical history or condition that would preclude me from participating in the twenty-ninth Annual JSO 10K Run/5K Walk on Fort Bragg.

Date

Printed Name of Participant

Signature of Participant

Completion of section below required if participant is under age 18.

Printed name of Parent/Guardian

Signature of Parent/Guardian of Minor