



PLEASE, CHECK ONE     5K     WALK

Name \_\_\_\_\_ M  F  Age on race day \_\_\_\_\_  
Please - Print CLEARLY

Permanent mailing address (if you want one next year) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (day) \_\_\_\_\_ (eve) \_\_\_\_\_ Shirt Size M L XL

WAIVER. READ CAREFULLY AND SIGN, IN CONSIDERATION OF YOUR ACCEPTANCE OF THIS ENTRY, I HEREBY, FOR MYSELF, MY HEIRS, MY EXECUTORS AND ADMINISTRATORS, WAIVE ANY RIGHTS & CLAIMS FOR DAMAGES I MAY HAVE AGAINST THE SPONSORS, COORDINATING GROUPS & INDIVIDUALS ASSOCIATED WITH THE EVENT, THEIR REPRESENTATIVES, SUCCESSORS & ASSIGNS & WILL HOLD THEM HARMLESS FROM ANY INJURY SUFFERED IN THIS EVENT. ALSO NONE OF THE ABOVE ARE RESPONSIBLE FOR THE LOSS OF PERSONAL ITEMS NOR ANY OTHER FORM OF AGGRAVATION IN CONNECTION WITH SAID EVENT. I HAVE BEEN WARNED THAT I MUST BE IN GOOD HEALTH TO PARTICIPATE IN THIS EVENT. I ALSO GIVE PERMISSION FOR FREE USE OF MY NAME & PICTURE IN ANY BROADCAST, TELECAST OR PRINT MEDIA COVERAGE OF THIS EVENT.

Signature \_\_\_\_\_ Parent/guardian if under 18 \_\_\_\_\_