

Name _____
Last Name First Name M.I.

Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail _____

In consideration of the application being accepted, I hereby, for myself, my heirs, and executors waive, release and forever discharge any and all rights and claims for damages which I may have here after accrue to me against the organizers and sponsors of the Young Life 5K, and verify that I am physically fit and have sufficiently trained for the competition of this walk/run. Further, I hereby grant full permission to any and all of foregoing to use my name, photograph, videotapes, motion pictures, recordings, or any other record of this event for legitimate purpose, without compensation or remunerations. I understand that bicycles, skateboards, roller skates or blades, animals and radio head sets are not allowed in the walk/run and I will abide by this guideline. I understand that if the walk/run is canceled due to circumstances beyond the control of the walk/run committee, my entry fee will not be refunded.

Date _____ X _____

Entry **MUST BE SIGNED** by runner, or by parent or guardian if under 18. One entry form per runner.

Fees Over age 18:

- Prior to March 1 (\$15.00)
 After March 1 and Event Day (\$20.00)

Fees age 18 & Under:

- Prior to March 1 (\$8.00)
 After March 1 and Event Day (\$10.00)

Donations:

- \$25 \$50 Other

School _____

Gender Male Female Age on race day _____

Shirt Size S M L XL

Availability of T-shirts not guaranteed after March 1, 2010

Amount enclosed \$ _____

Make Checks payable to Young Life

No refunds, No confirmation will be sent

Duplication of this form is encouraged - spread the word!

www.younglife5k.com

Mail to:

Young Life

P.O. Box 1433

Harrisonburg, VA 22803

Phone: (540)434-5806