

RUN FOR THE CHILDREN 10K/5K/1K Fun Run

May 21, 2011
Graham, TX 76450

Registration:

First Name: _____ MI _____ Last Name _____

Gender: M F Birthdate: ____/____/____ Age on Race Day(5-21-11) _____

Daytime Phone: _____ Evening Phone: _____

Address: _____ City/State: _____

Zip Code: _____ E-Mail Address: _____

T-Shirt Size: Adult S M L XL XXL

Child XS S M L

Registration Fees/ Circle the Race you will be entering: \$22 – 10K \$22 – 5K \$12 – 1K
(No Refunds) \$25 – 10K/5K (race day)

Make Check Payable to: Run For The Children/Virginia’s House

Mail to: Run For The Children
PO Box 1071
Graham, TX 76450

Start/Finish Line Location: 3rd Street & Oak on the West Side of the Downtown Square

Start Times: 8:00a.m. 10K / 8:05a.m. 5K/ 9:45a.m. 1K CHIP TIMING/AWARDS

I, the person submitting this entry, am aware that participating in an event such as a race or relay is a potentially hazardous activity, and that I (or my child, if I am signing as parent/guardian) should not so participate unless physically able. I verify that I am (or my child is) medically fit to participate and have sufficiently trained for the event prior to participation. I (and my child, if I am signing as parent/guardian) agree to abide by the rules and decisions of any event official, relative to participation, and assume all risks associated with the weather such as high heat and/ or humidity, traffic, road conditions, all such risks being known and appreciated. In consideration of acceptance of the entry fee, and intending to be legally bound, I (and my child, if I am signing as a parent/guardian) and any one entitled to act on my (or our behalf) assume all risks associated with participation, and waive any and all claims whatsoever against, fully release, race day volunteers, and all event promoters, including but not limited to Run For The Children, AllSports Timing, Virginia’s House, GRMC, and the City of Graham, Young County other sponsors, and their representatives and successor, from all claims, damages, or liability of any kind arising from my (or my child’s) participation in this event. I grant full permission to any and all of the foregoing to use my (and my child’s) name, or photographs, video tapes, and other recordings of participation in this event, without obligation or liability to me (and my child). I also understand that entry fees are not refundable. I have read this agreement carefully, and understand it, and certify my agreement by my signature below. Note for runners under 18 years of age must have parent/guardian’s signature or read and check online waiver.

Run For The Children and AllSports Timing

Signature (Participant) _____

Signature _____

(must be signed by parent/guardian if under 18 years of age)

For more Information call 940-550-8963 or contact info@runforthechildren.org