

REGISTRATION



STARTING TIMES

Kids 1k Fun Run (free 10 & under) 7:45 am

5k run/walk (3.1 miles) 8:00 am

RACE DAY REGISTRACION BEGINS AT 6:30 AT RACE SITE AT 908 CHURCH ST. ALVARADO TEXAS 76009

COST

5K Run/walk on Race Day----- \$ 20.00 5K Run/walk Thru august 4th -----\$ 10.00

REGISTRATION AFTER AUGUST 4TH \$15.00

REGISTRATION

Registration ONLINE AT: www.iasdalvarado.org/runforfun

Register by Mail:

Before August 21

DEADLINE TO REGISTER IS: August 25, 2017

Alvarado SDA Spanish Church

PO. Box 754

Keene Texas 7605

MAKE CHECK Payable To:

Alvarado SDA Spanish Church

AWARDS

TROPHIES FOR 1ST, 2ND, 3RD PLACES ON TIMING ON THE 5K RUN/WALK and other surprises

ALL PARTICIPANTS will get a small PRIZE

I know that running or walking a road race is a potentially dangerous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide any decision of Race official relative to my ability to safely complete the run or walk. I assume all risk associated with running or walking in the event including but not limited to falls, contact with other participants, the effect of the weather including heat and/or humidity, traffic and conditions of the road, all such risk being known and considered by me. Having read this wavier and knowing these facts and consideration of your accepting my entry.

I, for myself and anyone entitled to act on my behalf waive and release Alvarado SDA Church, Cox Racing Services, the City of Alvarado and all sponsors, their representative and successors from all claims or liabilities of any kind arising out of my participation in this event though that liability may arise out of negligence or carelessness on the part of the person named this waiver I grant permission to all the foregoing to use any photographs, motion, picture, recordings, or any other record of this event for legitimate purpose Race will be held regardless of the weather conditions. Registration is final, no refunds.

NAME(print) _____ AGE _____ GENDER _____

SIGNATURE _____ DATE _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

T-SHIRT SIZE XXL XL L M S (add 2.00 for XXL)

CIRCLE YOUR CATEGORY Beginner Intermediate Experienced

Parent or Guardian if under 18 years Old:

NAME (PRINT) _____ DATE _____

EMERGENCY CONTACT _____ PHONE _____

SIGNATURE _____
