



Registration Form

8:00 AM Registration / 8:30 AM Race Start Time
Pre-Registration Fee: \$20 / Registration Day of Race: \$25
This is a fun run and will not be officially timed.
For more information email: newfoundfitnessnh@gmail.com

Complete form and mail by July 1 with fee to: Firecracker 5K, 5 Park Street, Bristol, NH 03222
Make checks payable: Newfound Regional High School

Name: _____

Address: _____

Email: _____

Phone: _____ Age: _____ Gender: _____

First 65 pre-registered entries will receive a free T-shirt. Please indicate size: Adult S M L XL 2XL

I hereby signify that I understand the Newfound Regional High School, the Peter Corneliusen Memorial Scholarship Fund, the sponsors of the Firecracker 5K, the area where I run or walk and all other organizations and persons connected with this event are not to be held responsible for any injuries which I may suffer while taking part in this event or as a result thereof. In this connection, I hereby waive any claim for damages to my person or property. I further state that I am in proper physical condition to participate in this event. I grant permission for the organizer to use any photograph of or any other record of this event for any legitimate purpose.

Participant Signature

Date

If under 18, parent or guardian's signature