

## **The Critter Crawl 5K**

Linville, NC May 3, 2012 ● 6:30pm start

BIB NO.
AMT. PD.
RACE OFFICIAL USE ONLY

## **RACE ENTRY FORM**

		plete this form may adversely affect the timeliness and illegible by the organizers of this event may be decline
Fees: □ 5K Entry \$36	0 ☐ Parking pass \$10 (One parking pass	is required for each vehicle parking on Grandfather Mountain)
	PRINT THIS FORM AND MAIL WITH YOUR CHECK TO TH	E ADDRESS SHOWN BELOW
Last Name	First Name	Birth Date
		tate/ZIP
Telephone ()	E-Mail Address_	
□ Male □ Female	Shirt Size □ S □ M □ L □ XL	☐ XXL Age on Race Day
	Shirts guaranteed to those who register o	n or before April 19th
Emergency Contact	Emerge	ency Telephone No. ()
properly trained to safely complete to my ability to safely complete assigned to participants in this evincluding, but not limited to: falls; or precipitation; vehicular traffic; the knowing these facts and in considerations and volunteers working directors, and volunteers working	te the event for which I am submitting this entry form and this run within the designated time limit. I further agreevent) to any race official if directed to do so for any reast contact with other participants; runners; bikers; horsest the condition of the roads and/or trails; all such risks be ideration of your accepting my entry, I for myself and other sponsors and property owners, Grandfather Mou	ctivity. I should not enter and run unless I am medically able and and fee. I agree to abide by any decision of a race official relative eto surrender my race bib and timing chip (if timing chips are son. I assume all risks associated with participating in this race, and other animals; the effects of weather, including heat, cold, eing known and appreciated by me. Having read this waiver and anyone for whom I am entitled to act waive, release, and hold ntain, Lee Timing LLC, and all the agents, employees, officers, kind arising out of or related to my participation in this event. I the course at any time during this event.
Signature of Entrant	Signa Date Guard	ture of Parent or lian if under 18

Make checks payable to Grandfather Mountain Stewardship Foundation and mail to:

Grandfather Mountain Stewardship Foundation

PO Box 129

Linville, NC 28646

Amount Enclosed: \$
Amount Enclosed: \$