RHS 5K WINTER RUN-DERLAND



First Name:





Last Name:

Saturday, December 13, 2014 Begins at 9:00 a.m.

Official Entry Form

Middle Name:

Gender: Male Female (circle one)	Activity: Running Walking (Circle One)
Mailing Address:	
Street	Email Address
City, State	Phone #
Zip Code	Employer
Shirt Size: S M L XL	2XL (Please circle)
Registration Fee: \$20.00 PAID: Cash Check Money Order (Checks payable to RHS, 1901 S Park Drive, Reidsville, NC 27320)	
PRE-REGISTER TO GET T-SHIRT BY WEDNESDAY, DECEMBER 3. YOU MAY REGISTER THE DAY OF THE EVENT - (NO T-SHIRT)	
disclaimer . Waiver and Release: By participating in or my property that might result, including without I of injury, accident and/or illness during the Event. I administrators, agents and assigns) to release and of sponsors and their representatives and employees finegligence. I acknowledge that I have carefully react signature below, I am waiving any right that I may be negligence. I hereby grant full permission to any an media reporting or advertising of the Event without	·
By signing and dating below I agree to the above even	vent disclaimer:
Signature:	Date:
Parent's Signature (if a minor):	