



HOPE FOR BEREAVED, INC.

Sunday July 21, 2019 Long Branch Park • Liverpool, NY

7:30 Registration Opens – 5K starts @ 8:45 –

3K starts 9:30 am

Presenting Sponsor



&
Dannible Family
in memory of
Anthony F. Dannible

If you are pre-registered you do not have to arrive until 15 minutes prior to the event in which you will participate.

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION:

Bib Number _____

Team Name _____ (If applicable)

Last Name _____ First Name _____

Address _____ Apt. No. _____

City _____ State _____ Zip Code _____

Home Phone _____ Male _____ Female _____

Email Address: _____

Age on Race Day _____ Birthdate _____ Event: 5K Run _____ 3K Walk _____

Emergency Contact: _____ Contact Phone: _____

Register online at runsignup.com

**I would like to make an additional donation to
HOPE for Bereaved, Inc.**

OR
Send registration & check payable to:
HOPE for BEREAVED, Inc.
4500 Onondaga Blvd.
Syracuse, NY 13219

Check Here: \$10 ___ \$20 ___ Other Amount _____

Memorial Opportunity for \$100.00

Remember your loved one by having their name appear in the Memorial Section of the Run/Walk T- Shirt. Print name below:

Registration Fees:

\$30 pre-registration through July 20th, \$40 day of event.

All participants, aged 13 and older and registered by July 7th will receive a shirt.

All participants regardless of age, must be registered.



USATF Certified

Early Packet Pick Up Saturday, July 20th @ Fleet Feet, 5800 Bridge Street—10am to 2pm

Adult T-Shirt Size (Circle): Mens Womens (Circle): Small Medium Large XL 2XL 3XL

I would like to decline the shirt and donate the cost back to HOPE.

The event will take place rain or shine. We reserve the right to cancel in extreme circumstances. There will be no refunds.

Waiver of Liability Statement

Please Read and Sign: In consideration of this entry being accepted. I the undersigned, and anyone entitled to act on my behalf agree to hold harmless Hope for Bereaved, Inc., the Remembrance Run/Walk committee, the Onondaga County, Onondaga Lake Park, Long Branch Park, vendors, volunteers, and sponsors, from all cost and liability arising out of my participation. I hereby waive all of my claims for damage or loss to my person or property which may be caused directly or indirectly from my participation and hereby assume liability for any loss, damage, or other liability from the Remembrance Run/Walk for Hope. I hereby attest that I am in proper health and physical condition to participate. I give my permission for medical release should I be involved in any accident or health damaging situation or should I require a form of medical treatment. I hereby grant full permission to use my likeness in any photographs, videotapes, recordings or any other record of this event for promotional purposes.

I have read the above statement and agree to this form.

Signature Date

Official Use Only: Credit ___ Cash ___ Check ___