



Magic Ride 5K
 Pinwheel Glow
 Run/Walk-Virtual
 Run
**April 19-30th,
 2020**

Registration/Wavier Form

Virtual Run

Magic Ride Pinwheel Glow 5K Entry Fee:

\$25 per participant
 Or
Family of 4-\$65

Must Register by April 18th to Participate

Mail form and payment to:

CAPA ~ Child Abuse Prevention & Awareness – 20 Care Drive, Suite C-Hillsdale, MI 49242

 NAME: _____ AGE: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

PHONE: _____ EMAIL ADDRESS: _____

Long Sleeve shirt _____ **or Short Sleeve Shirt** _____ (Check One)

SHIRT SIZE: ___ **YOUTH** ___ **ADULT** **S** **M** **L** **XL** **XXL** **XXXL** (circle one)

Person to notify in case of emergency:

NAME: _____ RELATIONSHIP: _____

Address: _____ CITY, STATE, ZIP: _____

Phone (home): _____ Phone (work): _____

Please sign the wavier & photo release statement below (Parent or Guardian’s signature if under 18):

Wavier: As a participant in the Magic Ride 5K Run/Walk, I hereby assume any and all risks which might be associated with this event. I further waive, release, discharge, and covenant not to sue CAPA, its Board Members, employees, sponsors organizers, volunteers, or other representatives for any injuries or damages suffered as a result of taking part in the Magic Ride & 5K Run/Walk event. In addition, I give my consent to the unrestricted use by CAPA of the photographs of myself and/or my child(ren) in materials that may be published or promoted by newspapers, magazines, newsletters, radio, television, internet, or any other media source.

SIGNATURE: _____

Date: _____