



Spa Running Festival
13.1, 10K, 5K, 1K
Entry Form
Saturday, November 17, 2018
www.sparunningfestival.com



Make Check Payable to Spa Running Festival and mail to P. O. Box 1199, Hot Springs, AR 71902
Mail-in forms must be postmarked no later than Saturday, November 10
The Spa Running Festival does not offer refunds, defer registrations to future years or allow transfers to other participants

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Sex: M___ F___ **Date of Birth:** _____ **Age on Race day:** _____

Sign me up for (check only one event):

Half Marathon - *must maintain a 16:00 minute per mile pace to complete the course deadline of 10:30 am*

☐ \$50 4/7/18 ☐ \$60 eff. 7/1/18 ☐ \$70 eff. 10/1/18 ☐ \$80 eff. 11/16 & 17/18

¼ Training Long Sleeve Shirt (Unisex) Size: ☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ XXL

☐ \$35 -10K – RRCA State Championship Race

☐ \$30 - 5K Run/Walk

Long Sleeve Technical Shirt for 10K and 5K Run/Walk (Unisex) Size:

☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ XXL

☐ \$20 - XC² 10K – Cross City Championship (ages 12 – 19); School Attending: _____

Short Sleeve Event Shirt (Unisex) Size: ☐ S ☐ M ☐ L ☐ XL

☐ \$10 - Spa Squirt 1K (ages 2-10) Spa Squirt: ☐ YXS ☐ YS ☐ YM ☐ YL

Emergency Contact Information: Name: _____ Phone: _____

In Consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against volunteers, officials, sponsors or affiliated organizations of the of the Spa Running Festival for injury or illness which may directly or indirectly result from participation. I further state that I am in proper physical condition to participate in these events. I also give permission for the free use of my name and/or picture in account of this event.

Signature

Signature of Parent/Legal Guardian if Child is Under 18

Date