

Frankfort Frosty 5K Run/Walk

Sunday 12.3.17 - 2 p.m. Lakeview Park, Frankfort



Benefitting the 2018
Honduras
Ecumenical Medical/
Dental Mission

Fun for the Whole Family!
Santa and Elves, Holiday Music, Hot Chocolate,
Group and Family Pictures, Best Holiday
Costume Awards and Custom Awards



Benefitting the Mission Frankfort Clinic

Name:		Date of Birth:	Age on Race Day: M F		
Address:		City:		State:	Zip:
Phone:EVENT: Frankfort Fr	E-n	nail: sty 5K Virtual Run			
Age Division:	0-4 - 5-9 - 10-14	15-19	Please circle s	shirt size for lor	ng sleeved tee shirt:
20-2440-44	25-2945-4950-54	□ 35-39 □ 55-59	Youth Small	Youth Med	Youth Lg
60-64	□ 65-69 □ 70-74	₋ 75-79	Adult SM	Adult Med	Adult Lg
□ 80 +	 Wheelchair Division 		Adult XL	Adult 2XL*	Adult 3X*
Adults - \$20 through Nov 30; \$25 December 1-3 Child, 17 & under - \$15/person through Nov 30; \$25 Dec 1-3 \$3 extra for 2XL or 3XL shirt			* Adult 2XL or 3XL shirts are \$3 extra I do not want a t-shirt. Please donate cost of shirt to race beneficiaries I am signing up as part of the Frankfort Striders Run/Walk Series.		
Additional Donation in the amount of for:2017 Local Mission Effort \$2017 International Mission Effort \$			Race Packet Pickup & Late Registration: Fri, Dec 1, 3-6 pm & Sat, Dec 2, 8 am-4 pm: Cool Comfort and Sunday, December 3rd: Noon-1:45 p.m. Lakeview Park Award Ceremony: Lakeview Park Online registration:		
Referred by:			http://www.run	signup.com/Race	/KY/Frankfort/FrankfortFrost
TEAM NAME and/or Church***:			For more information, please refer to our website.		
Total Payment Enclosed, THANK YOU!			For Office Us	se Only: Check	# or Cash
	======	Release of Respo	onsibility ==	======	
bound, hereby for myself, m Church, its agencies and the participating in the Frankford	register and run under their proper name, s by heirs, my executors and administrators, on e employees and agents of both, involved of t Frosty 5K race competition on December shot during the Frankfort Frosty 5K race a	do waive and release forever with promoting and/or staging 3, 2017. I further state that I	r, any and all rights and c g the race for any and all am in proper physical co	laims for damages I m injuries suffered by me ndition to participate in	ay accrue against First United Methodi e while traveling to and from and while this event. I also release publication
Name (print)		_Signature			Date:
If under 18 signature of	Parent/Guardian				