

Shuffle for Shoes 5K Registration Form
Pepper Creek Trail June 11, 2016 8:00am

Name: (Only one entry form per person)			
Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of Birth (MM/DD/YY)	Age:
Street Address:			
City:			
State:			
Circle T-shirt Size:			
Adult: Small Medium Large XL XXL			
Child: YM YL			
Entry Fee is:			
<ul style="list-style-type: none">• \$20• \$25 on race day• 8 years and under are FREE.			
Please make checks payable to <i>Shuffle for Shoes</i> .			
*Donations of new pairs of running shoes are welcomed. All shoe donations go towards TISD students in need.			

WAIVER (Please read before signing.)

I know that running and/or volunteering for a road race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running in this event, including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road or trails, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the *Shuffle for Shoes 5K*, the city of Temple, Pro-Fit Event Services LLC, and all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature: (Parent's Signature if under 18 years of age)

Date: _____