

R

Same day

add \$10



or Walkers

For mail in or onsite registration fill out this form and bring with you



\$5,000 in prizes - must be present to win

Online registration, information at RunSignUp.com or www.dearbornheightsrotary.org. For additional information email: dhlynne-rotary@usa.net Check-In registration opens at 8:00 am

Proceeds benefit Dearborn Heights Rotary projects and The Great Lakes Burn Camp

FIRST NAME _____ LAST NAME ____

ENTRY FORM - PLEASE PRINT and FILL OUT ONE FORM PER RUNNER / WALKER

ADDRESS _____

CITY		STATE	ZIP CODE
EMAIL			· · · · · · · · · · · · · · · · · · ·
PHONE _		MALE FEMALE	DATE OF BIRTH
		PAYABLE TO: Dearborn Heights ail to: Dearborn Heights Rotary 26200 Ford Road PO # 1 Dearborn Heights, MI 48	, 113
REGISTER BEFORE	5K / \$25 (all ages) Race Only	ONE MILE / \$10 (all ages) Race / Walk Only	Chili Package over 21 includes DH Firefighters commemorative beer mug,
UGUST 10 Late egistration ter Aug 13 add \$5 Same day	5K PLUS CHILI PKG / \$35	ONE MILE PLUS CHILI PKG / \$20	one beer ticket and one \$5 prize raffle ticket. Chili Package under 21 includes one \$5 prize raffle ticket.
	5K PLUS CHILI PKG UNDER 21 / \$25	ONE MILE PLUS CHILI PKG UNDER 21 / \$25	

Rotary Waiver

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director, Timing Company, The Rotary Club of Dearborn Heights, The City of Dearborn Heights, The Dearborn Heights Firefighters and the Firefighters Union Local 1355 and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including but not limited to falls contact with other participants, the effects of weather traffic, and course.

sume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical

Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver. Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

DATE	