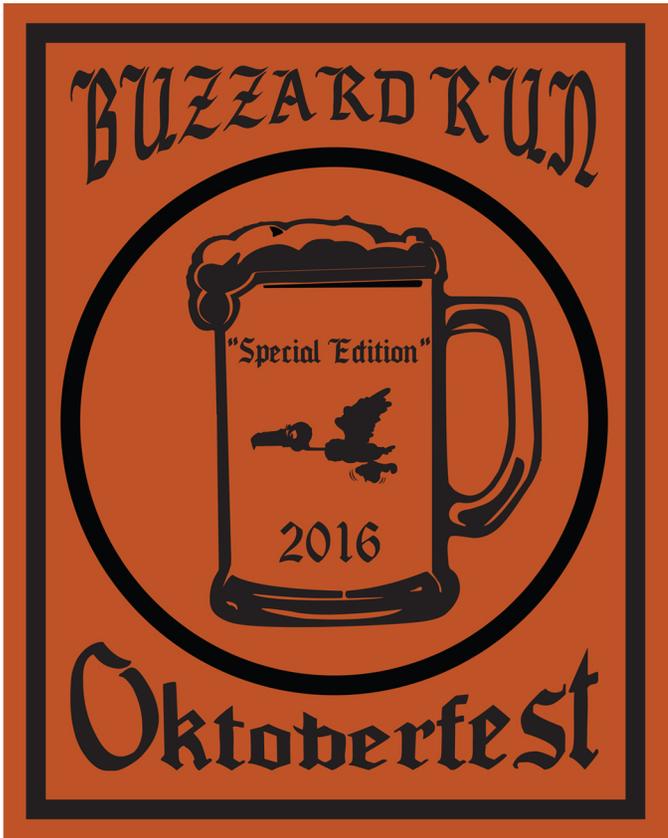


4th Annual

Registration Form

(Please Print)



Friday, September 30th, 2016

7:30 p.m.

New Vienna, Ohio

Entry Fee: \$25.00

Make Checks Payable to:

S.O.R.E. Club

P.O. Box 975

Washington C.H., OH 43160

Last Name _____

First Name _____

Age Day of Event _____ Date of Birth _____ Day _____ Yr. _____

Sex : Male Female Race: 5K Run/Walk 1 Mile Fun Walk

Shirt Size: Sm _____ Med _____ Large _____ X-Large _____

Street Address _____

City, State, Zip _____

Phone (_____) _____

E-mail: _____

(Subject to S.O.R.E. Club Mailings)

"I, for myself, heirs and assignees, hereby release the S.O.R.E. Club, New Vienna, Planning Committee, New Vienna Community Center, Village of New Vienna, all race sponsors, and all individuals associated with this event (Buzzard Run 2016 5k/1Mile Fun Walk) and their representatives from any and all claims that may arise as a result of my participation. I certify that I am physically fit and assume all risks associated with my participation."

Signature(s) Parent/Guardian _____
Required if participant is under age 18

