

## RESOLUTE REINDEER RUN/WALK REGISTRATION FORM



**December 9, 2017** 

NAME		
STREET ADDRESS		
CITY/COUNTY	_ State	Zip Code
*Cash  CIRCLE SHIRT SIZE: SMALL MEDI	h Prize award	ds for top 3 male & female runners
MAKE CHECKS PAYABLE TO: HABI	TAT FOR H	JMANITY OF LANCASTER COUNTY
MAIL \$25 REGISTRATION FEE TO:	HFHL	
	PO BOX 14	141
	LANCASTE	R SC 29721
		P CAN BE DOWNLOADED AT:  LancasterSC or REGISTER ONLINE at:

## **RELEASE OF LIABILITY**

I hereby certify the following: I am physically fit and have received medical clearance to participate in the Resolute Reindeer Run/Walk, Saturday, December 9, 2017. If I do participate, I, on behalf of myself, my heirs and assigns, and my estate, hereby waive and forever discharge the sponsors, organizers, affiliates, as well as their agents and employees, from any and all claims that may occur as a result of my participation.

Participant signature.	lf under 18, Parent or
Guardian's	signature

Date