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REGISTER FOR Fun Run, Walk and Roll 5K Facebook

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Fun Run, Walk & Roll 5K Registration



Saturday, March 11th

Crosby Confluence Park
2099 S. Convention Center Dr.
Registration: 8:00 a.m.
Run: 8:30 a.m.
Contact: Allison

435-673-7501

Held at the beautiful Crosby Confluence park this all trail back and forth run will be wonderful for all abilities and if you register as families it's \$10 for the head of household and only \$5 for each child. So come and be ready to have a great time!

Registration closes March 7th. Shirts may not be available after this date.

One form per participant required.

| rirst name (required) | Last Name (required) | Sex (required) | Age (required) | | |
|---|-----------------------------------|---|---------------------------|------|--|
| | | | | E.V. | |
| ddress (required) | | | | | |
| ity, State, Zip (required) | | | | | |
| hone (required) | | Email (required) | | | |
| Shirt Size (required) Adult - SM | | Name of affiliation of Club or Team | | | |
| Price (required) ● \$15 - Individual ○ \$10 - Head of Family ○ \$5 - Additional Family | | Family Name (if family price is chosen) | | | |
| Vaiver (MUST BE SIGNED) | hereby for myself, my heirs, exec | utor or anyone elsa who might su | o on my bobolf waive rale | | |

| discharge the sponsors, contributors and nature, whatsoever, arising out of, or in the event. I understand that all registration fee whatsoever foreseen, known, or unknown pictures, recordings, or any other recording director reserves the right in any event of later day that in the event of cancellation of | e course of my participation. I es are non-refundable. This rel i. The undersigned further grar igs of this event, for any purpos emergency or local or national | attest that i am physically ease and waiver extends ats full permission to use a e. Minors will be accepted disaster to cancel the rad | fit and have trained to partic to all claims of every kind or any photographs, videotapes d with parent's signature. Th | ipate in this nature s, motion e official race |
|---|--|--|--|---|
| Signature (required) | | | | |
| 3 | | | | |
| | | | | |
| Clear | | | | |
| Date (required) | | | | |
| YYYY-MM-DD | | | | |
| Parent or Guardian if under 18 | | | | |
| | | | .= | |
| | | - | | |
| Clear | | | | |
| Submit | | | * * 1 | |
| Packets will be available to pick-up at the March 10 th from 8am to 5 pm. | Red Rock Center For Indepen | dence 168 North 100 Eas | t Suite 101 St. George, UT & | 34770 Friday |
| Additional parking at the Dixie Convention | Center-runners meet at the | Crosby Confluence Park. | | |

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with disabilities of all ages to remain independent in their communities.

All proceeds will go to the Red Rock Center for Independence, a 501c3 non-profit organization serving nine counties to empower individuals

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