



DAPHNE'S LEGACY, INC.

CHARITY

Daphne 5k

Lakeview Park - Frankfort, KY

Friday, April 12th @ 6:30 p.m.

(Same day Registration begins at 4:30 p.m. at Lakeview Pavilion)



This 5k is a family-friendly event held in memory of Daphne Scruggs Fields. Proceeds from this event benefit Triple Negative Breast Cancer (TNBC) Research.

REGISTRATION & LIABILITY WAIVER FORM

Name of Participant: _____

Mailing Address: _____

Phone: _____

Email: _____

Age on Race Day: _____ Male _____ Female _____

T-shirt provided with registration -

please circle your size below:

ADULT: Small Medium Large

X-Large XXL XXXL

CHILD: Small Medium Large

X-Large

REGISTRATION FEE:

_____ **\$25** ADULT REGISTRATION
_____ **6 %** SALES TAX

_____ **\$10** FOR CHILD 12 AND UNDER
_____ **6 %** SALES TAX

Total Amount of Check Enclosed: \$ _____

Registration forms must be turned in by April 1st to ensure correct shirt size. Shirts cannot be guaranteed after this date.

WAIVER OF LIABILITY:

RELEASE OF RESPONSIBILITY (MUST be signed by each participant or by parent/ guardian if under 18)

Waiver: In consideration of the acceptance of this entry, I waive ALL claims for myself, my child and my heirs against the sponsors, cooperating and coordinating groups, Daphne's Legacy, Inc. and any individuals associated with this event and will hold them harmless for any and all injuries which may result from my participation. I hereby give my permission for event planners or media to use my name and photograph for newspaper or other advertising purposes. I certify that I (or my child) am physically fit for this event and understand the risks involved by participating in this event and I assume all responsibility for the health of myself and/or my child.

Signature: _____

Date: _____

The 5k will take place at Lakeview Park, RAIN or SHINE. For any questions, please call (502)229-2328 or email us at daphneslegacy@gmail.com



Make checks payable to: DAPHNE'S LEGACY, INC.

Mail to: 494 WADDY RD., WADDY, KY 40076

