

SYRACUSE 5K GLOW RUN, WALK, ROLL REGISTRATION FORM

August 12, 2017

Race Start Time 8:00pm

*This is a 5K run to benefit the 2017-2018 Syracuse High School Cheerleaders get to camp and uniforms. The run will begin and end at the Hospital Park. These is a team or individual event for anyone who wants to walk, run, or roll.
Bikes strollers and wheelchairs are welcome.

Entry Fee: \$15 until **July 31st** Price increases to \$20 after July 31st.

All kids 4 and under are free when accompanied by a paid adult.

Please make checks payable to: Syracuse High School Cheerleaders

Donations are tax deductible.

NAME: _____
(first) (last) (M.I.)

ADDRESS: _____

PHONE NUMBER: _____

AGE: _____ DATE OF BIRTH: _____ SEX: M F

T-SHIRT SIZE: S M L XL other: _____
(must be registered by July 31st to guarantee a shirt)

**** Participate with a team or as an individual****

Prizes for the best dressed team

NAME OF TEAM: _____

TEAM MEMBERS: (each member must complete an indivual registration form)

TEAM CONTACT PERSON: _____

In consideration of the acceptance of this registration/entry, I the undersigned, assume full responsibility for any injury or accident which may occur during my participation in this event, or while I am on the premises of this event. I also hereby for myself, my heirs, and executors, waive, release and hold harmless all sponsors, promoters, directors, volunteers, officials, or other persons associated with the event or their agent or employees, for all damages which may be suffered by me in connection with my entry or participation.

Furthermore, I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Entrant's Signature

Date

Signature of Parent or Legal Guardian (if entrant is under 18 years of age)

Date