

Breast Cancer Benefit Run – 5K
Benefiting the Hutchinson Family
Race Day – October 5, 2013
Glencoe, OK

Last Name
(Please Print)

First Name

M.I.

Male _____ Female _____ Date of Birth(mmddyy) _____ (parent signature required if younger than 18)

Daytime Phone Number: _____ Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

T-Shirt Size: _____ Sm _____ Med _____ L _____ XL

Waiver (Read before signing):

I know participation in this event is a potentially hazardous activity. I will not participate unless I am medically able to do so. I agree and abide by any decision of any race official regarding my ability to participate. I assume all risks associated with this event, including but not limited to falls, contact with other participants, effects of weather, traffic and the condition of the roads, all conditions being known and appreciated by me. Having read this waiver and knowing these facts and consideration of your accepting my entry, I, myself and anyone entitled to act on my behalf, waive and release the Town of Glencoe, OK, The Hutchinson Family, race officials, volunteers, and all sponsors from all claims or liabilities of any kind arising from my participation in this event. I allow any of the foregoing to use photographs and records of this event for legitimate purposes.

Participant Signature

Parent Signature

Date