

*****fill out this registration in its entirety*****

First Name _____ Last Name _____

Personal Email address (print clearly): _____

Your Cell Phone (in case of emergency) _____

Personal Mailing address: Street Number _____ Street Name: _____

City _____ State _____ Zip _____

Age on 06/02/2018: _____ Birthday: mm/dd/yyyy ____ / ____ / ____ Sex: M F

Adult t-shirt size: _____ (over 2X +2.00) Youth t-shirt size: _____

Event 5K Run _____ 5K Walk _____ Fun Run _____

Waiver - Read the following waiver thoroughly and sign below to confirm you consent to all terms in this waiver.

By acknowledging the waiver and agreeing to its terms, you shall release liability, waive legal rights, and deprive yourself of the ability to sue certain parties including but not limited to SISU and associated companies, race volunteers, food and beverage providers, and owners of the venue. By agreeing with your signature below, you acknowledge that you have both read and understood all text presented to you as part of the registration process; that you have read and accept the Waiver; and that you acknowledge that you are at least 18 years old and that you have thoroughly and completed read and agree to the conditions of this waiver.

Your Signature _____ Today's Date (MM/DD/YYYY) _____