

Last Name _

Street Address

Bring this to the event & photocopy as needed for additional space

First Name_

City



COMMUNITY LIVING

Province Daytime Phone No		Postal Code Evening Phone No	Postal Code Evening Phone No							
Name	Phone #	Address	Tax Rcpt Rqst	Amount Pledged	Amount Collected					

(one per person)

	First Name														
	Last Name														
	Address														
	City														
	Phone				-				-						
6	PC							-							
O	Birth Date	MM			DD			YY							
	Age			Sex		M		F							
	Circle						5K Run					5K Walk			
10K Run Little Elf Run (ages 6 & under)															
	I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the run. I assume all risks associated with running this event including, but not limited to: falls, contact with other participants, the effects of weather such as heat and/or humidity, traffic and the conditions of the road, as such risks are known to me. Having read this waiver and in consideration of your accepting myentry, I, for myself and anyone entitled to act on my behalf, waive and release WRACE, Ken Knapp Ford Sales, Community Living Essex County and WRACE organizations and other sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event.											it ts ad,			

REGISTRATION FEES

Pay Entry Fee or Collect a minimum of \$50 in pledges per person (One or the other, NOT both)

BIB#

5km-\$40 5km (under age 13) - \$25

Signature Parent if under 18

> 10km-\$40 10km (under age 13) - \$25

TeamPledges.

Little Elf Run for ages 6 & under!

This event is FREE and begins at 9:45am