

Blue Comet 1st 5K Run-Walk

October 20, 2012

REGISTRATION FORM

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip code: _____ Gender: _____

Telephone Number: _____ 1K Fun Run (13 and under) _____ 5K _____

Date of birth: _____ Email address: _____
(mm/dd/yy)

Race Day Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Shirt Size
(All sizes unisex)

___ **S**
___ **M**
___ **L**
___ **XL**
___ **XXL**

Payment Method: Check Payable to HCHS Softball Booster Club

Every participant must sign this waiver!

Runner's Agreement, Waiver, Release, and Acknowledgement

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am qualified, in good health, medically able, and properly trained. I assume all risks associated with this event, including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being know and appreciated by me. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the event. I fully accept and assume all responsibility for losses, costs, and damages I incur as a result of my running this event. I agree to abide by any decision a race official relative to my ability to safely complete the run. Having read this waiver, knowing these facts, and in consideration of my entry, I for myself and anyone entitled to act on my behalf, discharge, waive, and release the Halifax County Public School System, County of Halifax, Town of South Boston, along with volunteers and employees from all claims or liabilities of any kind arising out of my participation in this event.

Signature (Parent or guardian if under the age of 18)

Date

Entry Fees

	1K	5K
Through Oct. 15	\$15	\$25
Late Registration (after Oct. 15 th)	\$15	\$30

Total Amount Enclosed \$

Make Check Payable to:

HCHS Softball Booster Club

Mail this entry form to:

Halifax County High School
5K Run Walk
ATTN: Melanie Saunders
1 High School Circle
P.O. Box 310
South Boston, VA 24592

Email: mdsaunders@halifax.k12.va.us

<http://www.halifax.k12.va.us/>