



**TRI-STATE  
CHRISTIAN  
ACADEMY**

**2<sup>ND</sup> Annual Crusader 5K Walk/Run  
October 15, 2011  
Registration opens at 7:30 a.m.  
Race begins at 8:30 a.m.**

Please print clearly:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_  
*By providing your email you will receive notice of any updates to the event*

Phone Number: \_\_\_\_\_ Age: \_\_\_\_\_

Gender:  Female  
 Male

Category:  5K Walk  
 5K Run

T-Shirt Size:   
 Adult Small  
 Adult Medium  
 Adult Large  
 Adult X-Large

Registration:  Individual  
 Family, list names:  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

Entry Fee: Individual: \$20.00 until October 11, 2010 / \$25.00 October 12, 2010 until race day  
Family\*: \$60.00 until October 11, 2010 / \$75.00 October 12, 2010 until race day  
- Checks made payable to "Tri-State Christian Academy" or Register on-line at [www.active.com](http://www.active.com)  
\*Family rates apply to a maximum of 4 persons.  
Each participant must complete a registration form.

Amenities: T-shirt to first 100 pre-registered walkers/runners

Awards: Overall top male & female winners. Also, top male & female walkers.

Course: Route starting at Elkton High School, 110 James Street, Elkton, MD (Run4Fun Course)

WAIVER: In consideration of this entry being accepted, I, intending to be legally bound, hereby for myself, my heirs, executors, administrators, waive and release any and all rights I may have against the organization holding this event, its agents, representatives, successors and assigns for any and all injuries suffered by me in connection with said event. Also, none of the above are responsible for the loss of personal items at said event. I also give my permission for the free use of my (or that of my child's) name & photograph in connection with this event. Unregistered runners, running with dogs, rollerblades, bicycles and the wearing of headphones are prohibited on the race course at any time to ensure runners' safety and to comply with liability insurance standards.

By signing this form I acknowledge I have read and fully understand my own liability and do accept the restrictions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(If under 18, must be parent or guardian)

Drop Registration off at TSCA main office or mail to "TSCA 5K, 406 W. Pulaski Hwy., Elkton, MD 21921"

*Proceeds to benefit TSCA Athletic Department*