



presented by Charles Aris, Inc.
benefitting

BackPack Beginnings

2018 Registration Form

Online Registration available through August 24, 2018

www.Kirkwood5K.org

K5K Options and Entry Fees (please check one)

	<u>Before Race Day</u>	<u>On Race Day</u>
<input type="checkbox"/> Adults/Kids 13 & Over (before Aug 20).....	\$30.00.....	\$40.00.....
<input type="checkbox"/> Adults/Kids 13 & Over (week of Aug 20).....	\$35.00.....	\$40.00.....
<input type="checkbox"/> Kids 12 & Under.....	\$15.00.....	\$20.00.....
Kids' Fun Run.....	Free.....	Free.....

Please complete one registration form per person participating in the K5K.

Name: _____

Age on Race Day: _____

Date of Birth: _____

Male Female

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

T-Shirt Size:* Adult S M L XL

Youth S M L XL

*Registration fee includes one t-shirt.

Please indicate: Stroller Pusher Kirkwood Resident First Time 5K Participant (under 18)

Please enclose a check with this signed registration form.

Make check payable to Friends of Kirkwood, Inc.

WAIVER: In addition to my entry fee and as further consideration for the opportunity to participate in the Kirkwood 5K Run/Walk/Push on August 25, 2018 (the "Event") and any activities or events immediately prior to and after the Event, I fully release and discharge the Friends of Kirkwood, Inc. ("FOK"), its Directors (as officials of FOK and as individuals), and all individuals acting as volunteers before, during and after the Event (as officials of FOK and as individuals) from any and all claims for damages I or any participating child of mine suffers as a result of our participation in or traveling to or from the Event. I further warrant that I am over the age of 18, that I and any participating child of mine are in proper physical condition to participate in the Event and understand that participating in this event will subject me/us to vigorous physical activity and potentially dangerous conditions, including, without limitation, heat, humidity, uneven terrain, automobile traffic, and other participants who may cause falls or other injuries. **I UNDERSTAND THAT I AM WAIVING MY RIGHTS TO SUE.** Volunteers are expressly included in this agreement as third party beneficiaries.

Adult Printed Name

Adult Signature

Date

PLEASE RETURN ENTRY FEE & COMPLETED REGISTRATION TO:

Friends of Kirkwood, Inc.

119 Willoughby Blvd, Greensboro, NC 27408