

**Scott McDowell River Run 5K Run/Walk Official Entry Form**

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

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

email: \_\_\_\_\_ @ \_\_\_\_\_

Sex: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_

Race Division (circle one only)	<b>5K Run</b>	<b>5K Walk</b>
Entry Fee: (check only one)		Kids under 18
_____ \$10 Pre-registration (no T-Shirt)		_____ \$7 Pre-registration (no T-Shirt)
_____ \$20 Pre-registration with T-Shirt		_____ \$15 Pre-registration with T-Shirt
_____ \$15 Race Day (no T-Shirt)		_____ \$10 Race Day (no T-Shirt)
_____ \$25 Race Day (with T-Shirt) if available		_____ \$18 Race Day (with T-Shirt) if available

Shirt size: (circle one if applicable) **S, M, L, XL, XXL**

Please circle one: **T-Shirt Ladies Fitted Tank**

Make checks payable to: Boys and Girls Clubs of Clermont County

Send to: 212 Market Street, New Richmond, OH 45157

(Pre-registrations should be postmarked by Monday, August 15, 2011)

WAIVER: In consideration of the acceptance of my entry, I hereby waive, discharge and release on behalf of myself, my heirs, executors and assigns, all claims of any nature, including but not limited to damages, demands, actions, whatsoever in any manner, arising from my participation in the Scott McDowell5K, and do hereby release the Village of New Richmond, the race director, Running Time, LLC, coordinators, staff, all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all rules for participation and acknowledge that the Race Committee may refuse or return my entry at its discretion. I attest and verify that I understand the risks involved in such a run/walk, and that I am physically fit and have trained adequately in preparation and I agree to pay for my own medical expenses in the case of an accident or illness regardless of whether I have authorized such expenses. I HAVE NOTED ANY MEDICAL CONDITION on the reverse side of this form. I permit the use of my name and picture participating in this event for publicity.

ENTRY SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_