



Capital City Rotaract Presents the 2012
***First Annual 5k/1 Mile Race/Walk through the
80's Fundraiser***

Race Date: February 25, 2012 (Saturday)
Start Time: 10:00 AM **Location:** Brotherhood Bridge Trail

Race Contact: Alicia Maryott, 957-6269
aliciamaryott@hotmail.com

Course Description:

Both the 5K and 1 mile route will begin at the Brotherhood Bridge parking lot and follow the trail toward the Back Loop end of the trail. There will be cones at the turnaround locations for each route.

(cut along the dotted line)

ENTRY FORM

DISTANCES:

5K

1 Mile

(Please check one)

AGE: _____ **GENDER:** M____ F_____

LAST NAME: _____ **FIRST NAME:** _____

MAILING ADDRESS: STREET OR BOX: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **PHONE:** _____

WAIVER AND RELEASE: I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in club activities unless I am medically able and properly trained. I agree to abide by any decision of a race official in order to safely complete the run. I assume all risks associated with running and volunteering to work in club races. I am aware of the risks, which include falls, contact with other participants, the weather, road or trail conditions, and traffic. I have read this waiver and know the facts about running and road and trail races. In consideration of your acceptance of my application for membership, I, for myself and anyone entitled to act on my behalf, waive any right I may have to pursue an action against the Southeast Road Runners Club, the Road Runners Club of America, and all sponsors, and the representatives and successors of these entities, for liabilities of any kind arising out of my participation in club activities, even though liability may arise out of negligence or carelessness on the part of the persons named in this waiver. Strollers, dogs, roller blades, and headphones are not allowed.

Signature: _____ **Date:** _____
(UNDER 18 MUST HAVE PARENT OR GUARDIAN SIGN)

Bib Number:

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