

"Keep Moving Forward"



1st Annual White River 5K Run

April 30, 2011 Rand Park Calico Rock, AR

Race Time 9:00 am Check in begins 8:15

Entry fee includes snacks, goody bag and a T-shirt

\$20 Adults \$10 grades 12 and under

Walkers Welcome!!

Name _____ Age on 4/30/11 _____
Address _____
Email _____
Phone _____ Sex M F

Shirt Size Adult S M L XL Youth S M L
Entries accepted up to race time, however
Entries received before 4/18/11 will be given
priority for shirt sizes.

RELEASE:

I, _____, know that running and volunteering to work in races are potentially hazardous activities. I should not enter and run in this race unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks to myself or to _____ Who I have authority over, associated with running and volunteering to work in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Community Medical Center of IZARD County and all other sponsors, their representatives, and successors from all claims or liabilities of any kind arising out of my participation in the race and/or activities even though liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature _____ Date _____

Make Checks Payable to : **CMC 5K Run** Mail Entry Form and payment to: CMC 5K Run
Attn: Valerie French
61 Grasse Street
Calico Rock, AR 72519

Email: valerie.french@cmcofic.org
Phone: 870-297-2470

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