



**FOWLER'S FINEST 4-H CLUB  
invites you to participate in the  
FOWLER FIREWORKS FRENZY 5K RUN/WALK!**

When: Thursday, July 4, 2013, at 8:00 a.m. (EDT)  
Check in and race day registration from 7:15 – 7:45 a.m. (EDT)

Where: Fowler Town Park, corner of 7<sup>th</sup> St. and S. Adeway (Washington Ave.)

Who: runners and walkers of all ages. Ribbons for the top 3 in each age group!

Breakfast: All participants are invited to enjoy a FREE pancake breakfast served by the Fowler Rotary at the pavilion in the park following the race. Just present your race number!

T-shirt deadline: Please submit your registration by Tuesday, June 25th, to guarantee a t-shirt.

**FOWLER FIREWORKS FRENZY 5K RUN/WALK REGISTRATION**

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Sex:** M F  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Date of birth** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**E-mail** \_\_\_\_\_

**Shirt size** adult: S M L XL XXL XXXL child: S M L

Please submit a check for **\$20.00** payable to **Fowler's Finest 4-H Club** and mail to:

**Diane Costello, Club Leader**  
**1005 E. 10<sup>th</sup> St.**  
**Fowler, IN 47944**

Waiver: The following waiver is required for all 4-H sponsored activities, Fill in the blanks that apply to your situation. (Second and last lines if registrant is an adult; first, second, and last lines if registrant is under 18.)

I understand that participating in 4-H activities can involve certain risks to me or my child. On behalf of me and my child I accept those risks. I hereby release and discharge Purdue University, The Trustees of Purdue University, the Benton County Commissioners, the Benton County Cooperative Extension Service, and each of their trustees, officers, appointees, agents, employees, and volunteers ("Released Parties") from all claims which my child or I might have for any injury or harm to my child or me, including death, arising out of my or my child's participation in any activity related in the above activity(ies), even if such injury or harm is caused by any of the Released Parties. I do not, however, release these individuals and entities from liability for intentional, willful, or wanton acts and this release shall not be construed to include such acts.

\*Name of Youth Participant \_\_\_\_\_

\*Signature of Parent/Legal Guardian Date \_\_\_\_\_

Home phone, Cell phone \_\_\_\_\_

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