Family Health Run Registration Form

Mail Form and Entry Fee to: Family Health Run, Attn: Larry P.O. Box 221 Martinton, IL 60951

Last Name	First Name
Team/Family Name (if any)	Team Captain oer. There is no entry fee for children in strollers.
For Group Entries, complete one form per memb	per. There is no entry fee for children in strollers.
Street Address	
City/State	Zip
Phone	E-Mail
Emergency Contact Name and Phone	}
Sex M F Age on 9	9/29/12
T – Shirt Size (Circle) Adult S M L X	XL 2XL 3XL Youth 8/10 10/12 12/14
Select Event:	Please Enclose:
5k Competitive Run	\$15 Early registration by Sept. 19th
5k Walk	\$20 Sept. 19 th – Race Day
1mi. Family/Stroller Walk	\$50 Family/Team up to 4 (by 9/19/12)
* No Pets allowed.	(\$10 each additional member)
* If you are going to run any part of the event, please	e register as a runner.
	your donation. The Health Fair will remain open and
Waiver and Release	
With this entry, I, the undersigned, intending to be legally bound,	hereby, for myself, my heirs, my executors and administrators, waive and nands, costs, and expenses, which I may now or in the future have against
the 5k Family Health Run/Walk, the St. Anne Pumpkin Festival, or any	
	attest that I, and any minors in my care for this event, are physically fit and
recordings or any other record of this event for any legitimate purpose.	
G*	
Signature (Parent/Guardian, if entrant is under 18)	Date