

Registration Form
*Name:
*Address:
*City: *State: *Zip:
Phone: Email:
Male/Female: Age:
I am running in the: (check one) 5k: 10k:
<u>Please initial after each statement:</u>
1) I understand that I am obligated to bring an unwrapped toy to packet pickup on December 3rd starting at 1 PM: (initial)
2) I understand that I will NOT be allowed to participate in the race above if I do not donate an unwrapped toy: (initial)
3) No refund will be given if I do not donate an unwrapped toy (initial)
<u>Make checks payable to</u> : "Tri the Oatka". Complete & return this form with payment to: Karen Samis, 9454 South Street Road, Le Roy, NY. 14482
WAIVER/RELEASE - SIGNATURE REQUIRED I hereby certify the following: (1) I am physically fit and have received medical clearance to participate in Jinglin All the Way Run, (2) In consideration for my application to participate in Jinglin All the Way run being accepted, I, on behalf of myself, my heirs and assigns, and my estate, hereby waive and forever discharge the sponsors, organizers, aliates, as well as their agents and employees from any and all claims that may accrue as the result of my participation, and (3) I hereby grant the Tri the Oatka Committee permission to reproduce, publish, circulate, copyright or otherwise use any and all photographs and/or video of me and/or my family, taken at the Jinglin All the Way Run .
Signature: Date:

If under 18, Parent's or Guardian's signature: