

Round Lake Area Park District

FROSTY FOOTRACE 5K RUN/WALK ENTRY FORM

Registration code: 9070

Mail this completed application with check/money order to:
Round Lake Area Park District, Attn: Race Committee, 814 Hart Road, Round Lake, IL 60073.

All proceeds benefit the Round Lake Area Park District "Fun"ds for Recreation Scholarship Fun. Sorry, no refunds, no transfers.
(This form may be copied. Only one registration per form.)

(L) Name: _____ (F) Name: _____

Address: _____ Apt# _____

City: _____ State: _____ Zip: _____

HM Phone: _____ WK Phone: _____

Birth Date: _____ Age on Feb. 25, 2018 _____

Sex: **M** **F**

IN CASE OF EMERGENCY CALL:

Name: _____ Phone: _____

Relationship: _____

Medical problem(s)? _____

ENTRY FEE INCLUDES:

The first 150 people to register will receive a fun promotional item.

Pre-registered	Adults <input type="checkbox"/> \$25	Children 13 & under <input type="checkbox"/> \$12
At Event	Adults <input type="checkbox"/> \$30	Children 13 & under <input type="checkbox"/> \$15

FORM OF PAYMENT:

- Check (please make payable to Round Lake Area Park District)
- Visa MasterCard Discover American Express

Credit Card #: _____

Expiration Date: _____ Security Code: _____

Payment Amount: _____

Authorized Signature: _____

WAIVER

Read carefully before signing:

I know that running and/or walking a road race is a potentially hazardous activity. I should not enter and run or walk 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 course. I assume all risks associated with running and walking in this event, including, but not limited to: falls, contact with other participants, the effects of the weather, including low temperatures and/or wind chill, traffic and conditions of the road. All such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of this entry, I hereby for myself, heirs, executors and administrators waive any and all claims I may have for damages against the Round Lake Area Park District and all sponsors and individuals associated with the event, their representative and successors, and assignees for any and all injuries suffered by me in connection with this event, including pre- and post-race activities. I hereby grant permission to the Round Lake Area Park District and its authorized agents to use my name and photographs, videotapes, motion pictures, recording or any other record of my participation in this event for any purpose. There will be a \$15 fee for all returned (NSF) checks. Sorry, no refunds permitted.

Participant's Signature _____

Date _____

If under 18, Parent or Legal Guardian's Signature _____

Date _____

"FUN"DS FOR RECREATION DONATION

I have included my donation for the "Fun"ds for Recreation Scholarship Program with my entry fee in the amount of:

- \$10 \$20 \$50 Other: _____

RACE DAY VOLUNTEERS NEEDED

Volunteer Name _____

Phone Number _____