

2011 CT RACE IN THE PARK

MAY 7, 2011 CT RACE IN THE PARK Official Entry Form

Individual mail-in registration closes 4-27-11.

Individual ONLINE registration closes 5-1-11, at midnight.

Teams mail-in registration closes 4-18-11.

Teams ONLINE registration closes 4-24-11, at midnight.

PLEASE PRINT CLEARLY. One Entry Form Per Person.



First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Female Male DOB _____ Age on 05/07/11 _____ USATF# _____

Please check Event & T-Shirt Size:

EVENTS

- Kids' 1 Mile Run Kids' Fun Run
- Male 5K Run Female 5K Run
- 1 Mile Walk 4K Walk

T-SHIRTS Check one

- Adult M L XL XXL
- Youth S M L
- Size availability cannot be guaranteed.*

TEAM INSTRUCTIONS (Suggested minimum 8 participants)

Choose a team captain who can either: Register the team online at www.ctraceinthepark.org, OR call the RACE Office at 860-827-7103 for an official team registration kit.

Team members can register online OR complete this entry form, sign it, and submit it with payment to the team captain.

ALL paper registration from team captains must be received no later than **April 18, 2011**. Team online registrations must be received by **April 24, 2011**.

Registration Check List

- ✓ One entry form per person
- ✓ Check age, gender, event
- ✓ Sign the Waiver
- ✓ Enclose payment
- ✓ Mail to: **CT BHI, INC.**
P.O. Box 566
New Britain, CT 06050
- ✓ Entry fees are not refundable, transferable, or tax deductible.

Category	Age	Preregistration until 4/28/11	Friday & Saturday	Amount Enclosed
Docs Who Care		\$ 100.00	\$ 100.00	\$
SEEDS OF HOPE		\$ 75.00	\$ 75.00	\$
<i>Help us grow the funds for breast cancer research</i>				
Adult	19+	\$ 26.00	\$ 36.00	\$
Youth	13-18	\$ 11.00	\$ 21.00	\$
Child	0-12	\$ 6.00	\$ 11.00	\$
Hot Pink Sunglasses		\$ 5.00 Each		\$
Additional Tax Deductible Donation				\$
TOTAL AMOUNT ENCLOSED				\$

Make checks payable to: CT RACE IN THE PARK Please use a separate check for pledges.

I am interested in volunteering. Please send info.

Survivors, your numbers count! I am a breast cancer survivor of _____ years.

As a survivor, I plan to attend the RACE Day Survivor Brunch at **11:00 a.m.**

RACE WAIVER AND RELEASE (Participant must sign in order to participate in Race)

I know that running/walking is a potentially hazardous activity. I should not enter and run/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 run/walk. I hereby certify that I am in good health and I have trained to run/walk the distance of the race, which I am entering. I assume all risks associated with running/walking in this event including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the 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 your accepting my entry into this running/walking race, I, for myself and anyone entitled to act on my behalf, waive and release the CT Breast Health Initiative, Inc., its officers, directors, agents, volunteers and employees, the Hartford Marathon Foundation, Inc., its officers, directors, agents, volunteers and employees, all states, cities, countries or other governmental bodies or locations in which events or segments of events are held, all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that bicycles, skateboards, baby joggers, roller skates or inline skates, animals, and radio headsets are not allowed in the event and I will abide by this guideline.

X

Signature (Parent's or Guardian's Signature if under age 18)

Date

FOR OFFICIAL USE ONLY Batch# Ck Amt Cash

Date Entr Date Rec Ck # Entr By

