

**2016 Sleigh Bell Run
Race Day Registration Form**

Participant information (PLEASE PRINT CLEARLY)

First name: _____

Last name: _____

Gender: Male Female

Birthdate (mm/dd/yyyy): _____ / _____ / _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____

Email: _____

Shirt Selection Circle One (T-shirt not guaranteed for day of registration):

Youth Large (14-16)	Youth Medium (12-14)	Youth Small (8-10)
XXL (\$3extra)	XL Large Medium	Small

Walk/Run Selection: Circle One

2-mile walk	2-mile run	5-mile run	Reindeer Games
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Fees and donation: Race Day Fee: \$ 25.00

Tax-Free Donation: \$ _____

Total Due: \$ _____

Waiver

I, for my heirs, executors and administrators, hereby waive all rights and claim for damages injuries, losses, or death that may occur in the Sleigh Bell Run/Walk, with route directed down public city streets, sponsored by race sponsors, event staff and volunteers. I declare that I am physically fit and sufficiently trained for this event and assume responsibility for risks occurred therein. I also grant full release to all parties for this event to use my name and photograph for news coverage and publicity purposes.

Participant Signature: _____

Under 18 Parent/Guardian Name: _____

Parent/Guardian Signature: _____