

Michigan Fallen Warrior Memorial 5K Run/Walk

- **Date:** June 7, 2013
- **Time:** 7 pm
- **Location:** Portage West Middle School

7145 Moorsbridge Rd, Portage, MI 49024

- **Pre-Registration:** \$30 through June 5, \$35 after that up to the evening of the race (shirt is not guaranteed)
- **Make Checks Payable to:** Michigan Fallen Warrior Memorial
- **Mail registrations to:** Jeffrey L Baas, 5353 Parkview Ave Kalamazoo MI 49009

First: _____ **Last:** _____ **Age:** _____

M or F

Address: _____

Email: _____ **Phone:** _____

Shirt size: S M L XL XXL XXXL

Participation wavier – I know that running may be a hazardous activity. I should not enter or run or walk unless I'm medically able and properly trained. I agree to abide by any decision of all event officials relative to my ability to safely participate. I assume all risks associated with participating in this event including, but not limited to falls, contact with other participants, the effects of weather, traffic and the conditions of the road and trail. With all such risks being known and appreciated by me. Having read this wavier, knowing these facts, and in consideration of your accepting my entry, I for myself and anyone entitled to act in my behalf, waive the release of Portage Public Schools, participating sponsors, subcontractors, representatives and successors from all claims and liabilities of any kind arising out of my participation in this event. I grant all permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. The event has the right to cancel the event in case of severe weather. Registration fees are non-refundable and non-transferable.

Signature: _____ **Date:** _____

Participant or legal guardian if participant is under 18.