

Wauzeka 5K Walk-Run Registration Form September 2, 2019

Thank you for participating in our event. Cost of registration is \$15.00 per person and \$5.00 for kids 14 and under. Awards will be given for the top three male and female finishers in the event. Awards will also be given for the oldest and the youngest participants. Checks can be made to the Wauzeka Lions Club. Registrations can be mailed to:

Kathy Degnan
410 E. Main Street Wauzeka, WI 53826
or dropped off at L&M's BP in Wauzeka, WI.

You must register by August 17, 2019 to be guaranteed a shirt; however, entries will be accepted until 7:15 a.m. on September 2nd. The walk/run will begin at approximately 7:30 a.m. Entry numbers and shirts can be picked up at the football field on the day of the race between 6:30 and 7:15 a.m. Call (608) 875-6902 with any questions. Please complete the information below and mail it with your registration fee.

I hereby absolve and hold harmless the Village of Wauzeka, Wisconsin in the County of Crawford, all sponsors, volunteers, and race officials from any liability for any injury incurred by myself with participation in the Wauzeka 5k Walk/Run. I further provide that this consent and waiver applies to my heirs, executors, and assignees. I attest and verify that I will participate in this event and my physical conditions have been verified by a licensed medical doctor. Further, I grant full permission to any and all of the foregoing to use my name and any photographs or any other record of me participating in the event for any publicity and/or promotional purposes without obligation or liability. I have read the entry provided and certify compliance by my signature below. I also understand entry fees are nonrefundable. You MUST sign and date here to indicate you understand the above information.

Name (printed): _____ Age _____
Signature _____ Date signed _____ Emergency Contact Name _____
_____ Phone # _____

If this form is being completed for someone under 18, the parent / guardian must sign and date here.

Parent/Guardian Signature _____ Date signed _____
Parent/Guardian Printed Name _____ Parent/Guardian
Emergency Contact Phone # _____ Shirt size (circle one):
Adult: S M L XL XXL Youth: 6-8 10-12 14-16 Email Address (optional)
