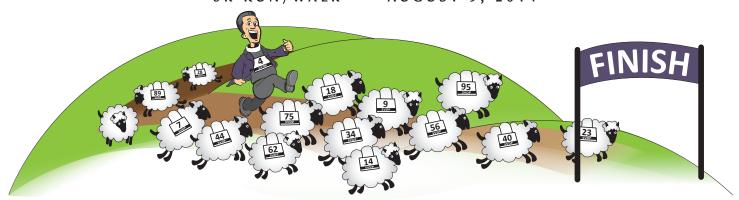
FASTER THAN THE PASTOR

5K RUN/WALK • AUGUST 9, 2014



FAMILY REGISTRATION

Family Name					
Address		City	S	Γ Zip_	
Phone		_Email			
Please List name, race day	age, gender & shi	rt size below			
Name	Age	Gender	Shirt Size	5K (\$25)	_1K (\$20)
Name	Age	Gender	Shirt Size	5K (\$25)	_1K (\$20)_
Name	Age	Gender	Shirt Size	5K (\$25)	_1K (\$20)_
Name	Age	Gender	Shirt Size	5K (\$25)	_1K (\$20)_
Name	Age	Gender	Shirt Size	5K (\$25)_	_1K (\$20)_
Name	Age	Gender_	Shirt Size	5K (\$25)	_1K (\$20)_
Adult SML Entry Fee	XLXXL	Youth SN	ML	S	
Family Entry	MAX \$120		1000	- 2	
Amount Enclosed	\$		200	6	
Cash Check # _		5			
Make Checks Payable to: SVDP - Faster than t	he Pastor 5K				7
MUST	SIGN WAIVER	R & RELEASE	ON BACK	OF FORM	£ \$ £

Not just a race against the clock, but a race against the cloth!

Waiver & Release

I, the undersigned, knowing that running a race is a potentially hazardous activity, enter this race certifying that I am medically able and properly trained. I assume the risk of running and other risk associated with this event, not limited to falls, contact with other participants, trees, effects of weather, including high heat and humidity, and the conditions of the city trails.

Knowing these facts, I hereby, for myself and my heirs executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release, and discharge the Church of St. Vincent de Paul or any sponsors of this event, volunteers, race officials, from any and all claims or liability for death, personal injury, or property damage of any kind or nature arising out of, or in the course of, my participation of this event. This release and waiver extends to all claims of every kind of nature whatsoever, foreseen and unforeseen, known and unknown.

The undersigned further grants full permission to the race organizer to use any photographs of this event for any purpose.

If the participant is under 18 years of age, a parent or legal guardian must sign this waiver for the participant.

Please print name of participants	Please place signature of legal guardiar
	Date Signed

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