

2ND ANNUAL UNIVERSITY PARK CROSS COUNTRY 4 MILER & 4TH ANNUAL TWILIGHT 'CREAKY BONES' 5K TRAINING SERIES

REGISTRATION: FILL OUT THE FORM BELOW. PLEASE PRINT CLEARLY AND COMPLETE THE ENTIRE FORM.

First Name	Last Name

Address	City

State	Zip

Phone	Cell Phone

Birthday (MM/DD/YYYY)	Age

E-Mail	Club Name

Female
 Male

PLEASE SELECT THE 8 WEEK TRAINING PROGRAM YOU WOULD LIKE TO JOIN:

- 2ND ANNUAL UNIVERSITY PARK CROSS COUNTRY 4 MILER**
Beginning on July 14th at 6:30pm (Race Date: September 11, 2010)
\$75 (includes \$25 entry fee)
- 4TH ANNUAL TWILIGHT 'CREAKY BONES' 5K**
Beginning on August 30th at 6:30pm (Race Date: October 23, 2010)
\$75 (includes \$25 entry fee)



- 8 week training program with written schedules to follow
- Weekly group runs and workouts
- Coaches and mentors accessible by email
- Special Fit2Run Training Team technical tee
- Technical socks
- In-store informational clinics and injury screenings
- In-store discounts/specials
- Safe and fun way to train for your goal

Enclosed, please find a check for \$ _____
(payable to Fit2Run)

Please charge my credit card: MC VISA AMEX

Card Number: _____

Name on Card: _____ Exp. Date (MM/YYYY): _____

Signature: _____

GENERAL WAIVER AND RELEASE OF LIABILITY AGREEMENT (must be signed)

All participants in any event(s) related to Fit2Run or any of its sponsors (hereafter known as "event") are required to, and hereby do, assume all risk of participation by signing this General Waiver and Release Liability Agreement.

In consideration of this entry, I, for myself, my heirs, devise, executors, administrators and assigns hereby waive, release and discharge any and all Claims against Fit2Run, The Runner's Superstore, Robinson Sports, Inc., and all sponsors conducting this event, or their employees, representatives, or successors, for any and all damages or injuries I may suffer. I hereby grant permission for the free use of my name and picture in any broadcast, brochure or account of this event.

PARTICIPANT HAS READ THE FOREGOING AND INTENTIONALLY AND VOLUNTARILY SIGNS THIS WAIVER AND RELEASE OF LIABILITY AGREEMENT.

**IF NOT REGISTERING IN-STORE,
ALL COMPLETED FORMS SHOULD
BE SENT TO:**

Fit2Run, University Center
8123 Cooper Creek Blvd.
University Park, FL 34201

Signature Acknowledging Waiver of Liability
(Note: Parent or Guardian must sign if under 18)

Printed Name

Date