Professional Business Women presents 28th Annual



First Name



BIB# Assigned for Runner's Only

\$30 / Person CASH **CHECK**

DAY OF REGISTRATION FORM

Last Name

2 MILE WALK	2 MILE RUN*	5 MILE RUN*
	Course – Circle One	
No guarantee of Tshirt.		
AGE Day of Race		
Gender (circle) FEMAL	LE MALE	
Email Address		
Phone Number		
City	State	_Zip
Address		

Bib will be issued.

Please review and sign below:

Please review and sign below:

In consideration of your acceptance of this entry, I hereby, for myself, my executors and administrators, waive any and all rights and claims for damages I may have against the sponsors, coordinating groups, and any individuals associated with the event, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with said event. Also, none of the above are responsible for the loss of personal items nor any other form of aggrevation in connection with the said event. I have been warned I must be in good health to participate in this general. Has give norming in forth for each of the guest of the groups and the said of the sa participate in this event. I also give permission for the free use of my name and picture in any broadcast, telecast or print media account of this event. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept restrictions.

Signature

Parent's Signature (if under 18)

5 MILE RUN*

Bib will be issued.

Notes Area for Cheesehead Chase Team