



The Wilson Community Enhancement Charity presents

Saturday June 1, 2019

5:00PM

Clark's Park

Harbor St. Wilson, NY

www.wcecinc.com

34th Annual

# WILSON SALMON RUN



Course certified to be accurate by the USATF #NY07027JG

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Street Address / PO Box

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Age on Race Day

\_\_\_\_\_  
Male or Female

T-Shirt Size: S M L XL

Extra Chicken Dinner(s) # \_\_\_\_\_ @ \$12.00 each = \$ \_\_\_\_\_

Pre-Registration: Received 5/25/2019

\_\_\_\_\_ Adult \$24.00

\_\_\_\_\_ Student (18 and under) \$18.00

Late Registration: 5/26/19 - Race Day

\_\_\_\_\_ Adult \$30.00

\_\_\_\_\_ Student (18 and under) \$25.00

**Please make checks payable to: WCEC**

**Mail to: Wilson Salmon Run**

**c/o WCEC**

**PO Box 875**

**Wilson, NY 14172**

Waiver: In consideration of your accepting the registration, I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damage against the **WILSON COMMUNITY ENHANCEMENT CHARITY INC.**, its agents, representatives, successors, and assignors for all injuries suffered by me at said meet. I have trained sufficiently and am physically fit to compete in this race.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent/guardian, if under 18