

2025 COMPLIMENTARY RACE REGISTRATION FORM

A registration form must be completed by each participant. In addition, the RELEASE identified below must be signed by all participants and/or by the parent or guardian if the participant is under 18 years of age.

You may scan/email the form to glbas.org@gmail.com or mail the completed form to: Great Lakes Bay Animal Society | PO Box 2891 | Midland, MI | 48641

Sponsorship Levels Entitled To COMPLIMENTARY Race Entries			
□ Top Dog (4 Entries)	Barker Marker (3 Entries)	□ Lap-It-Up Water Buckets (2 Entries)	
Date			

Company Sponsor Name

RACE REGISTRANT INFORMATION

Runner/Walker	Name
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Address Line 1

Address	Line	1
Audiess	LILLE	4

Address Line 2		
City	State	Zip Code
Phone	Email	

Age	□ I am 18 years of age or older		□ I am under 18 years old		
Gender	Male		Female		
I plan to participate as	5K Run/Walk Individual Only		□ 5K Run/Walk Individual with Dog(s)		
T-Shirt Size	🗆 SML	D MED	LRG	□ X-LRG	□ 2X

This release must be signed by EACH participant and/or By the parent or guardian if the participant is under 18 years of age.

I, the undersigned, in consideration of acceptance of the entry and registration as a participant in the Great Lakes Bay Animal Society (GLBAS) Fast & Furriest 5K Run/Walk, waive any and all claims which I and my heirs or assigns may now or hereafter have against GLBAS, its members, the Midland Parks and Recreation Board, and all officials, volunteers and sponsors of the GLBAS Fast & Furriest event, which may indirectly or directly results from my participation in the GLBAS Fast & Furriest event. I further warrant and represent that I am in proper physical condition to participate in the GLBAS Fast & Furriest event and am not participating in this event against physician's advice nor am I taking medications which would impair my health or ability to participate in the GLBAS Fast & Furriest event. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes.

Signature	Check this box if you are	Date
	the parent/guardian.	