



Abigail
Pregnancy
Services



Saturday, June 8, 2024

REGISTER BY MAY 20th

CHECK-IN BEGINS: 7:30 AM
5K BEGINS: 8:00 AM

NAME: _____

PHONE: _____ **SEX:** _____

ADDRESS: _____

Age Divisions:

(Circle One - must be age on 5/20/23)

| | | |
|-------|-------|-------------|
| 5-10 | 20-29 | 50-59 |
| 11-15 | 30-39 | 60 and over |
| 16-19 | 40-49 | |

T-SHIRT SIZES (CIRCLE ONE): **SMALL** **MEDIUM** **LARGE** **SMALL** **MEDIUM** **LARGE** **XL** **2XL** **3XL** **4XL**
 YOUTH **YOUTH** **YOUTH** **+** \$2 **+** \$3 **+** \$4

- 5K ENTRY FEES:**
- \$30 Adult Runners
 - \$25 Student (under 18) Runners
 - \$35 Adult Runners after May 1, 2023
 - \$30 Student (under 18) Runners after May 1, 2023

Release and waiver of liability: I agree that I will not hold Abigail Ministries, The City of Willard, or any other organizing parties liable for any injuries, accidents, or mishaps incurred in connection with the Abigail Pregnancy Services 5K Run/Walk. I attest that I am physically fit and sufficiently trained to participate in this event. I further grant authorization for the free use of my name and/or photographs, videotapes, or recordings of my participation in the event.

PARTICIPANT'S SIGNATURE: _____ **DATE:** _____

*If under 18, the participant's parent or guardian must sign



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