

2011 Attica Turkey Trot



Charity 5K Walk/Run Registration Form

Proceeds to benefit Attica Food Pantry supported through A.S.K.

November 24, 2011 – 9am -- Rain or Shine

Registration Information: Complete and Mail to: Brad Smith, 507 E. Pike St., Attica, IN 47918

Name: _____ Male ___ Female ___

Street: _____ Age on Race Day _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____ Email _____

T-shirt Size (only guaranteed for those that register on or before November 8th)

XSmall __, Small __, Medium __, Large __, XLarge __, XXLarge __

Payment Options:

Credit Card: VISA __, MC __ Amnt Paid _____ (**\$18 on or before 11/8, \$20 11/9 thru RACE DAY**)

Credit Card Number: _____ Exp date _____ 3-Digit # _____

Signature on waiver below serves as your permission to charge your credit card.

CHECKS ARE PAYABLE TO: Attica Turkey Trot

Waiver:

In consideration of the foregoing, I, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against any of the sponsors, organizers, City of Attica, Attica High School, Sam Crane, parents of Sam Crane for any and all claims of damages, demands or loss actions whatsoever which may arise as a result from participation in this event. I understand and acknowledge that participating in this run/walk event may expose me to dangers from both known and anticipated risks. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and my physical condition has been verified by a licensed medical doctor. Further, I grant full permission to any and all of the foregoing to use my likeness for any legitimate purpose whatsoever.

Signature _____ Date _____

Parent's or Guardian's Signature if under age 18 _____ Date _____