

## Registration Form

Please Print(one form per entrant)

Fill out completely and mail or drop off to the address below. We must receive it by MONDAY, SEPTEMBER 5, 2011. All mail received is time and date stamped by the City Clerk's office.

MAIL TO: Attn: Kristen Kulavich/Run Through the Roses, 100 Hughes Rd, Madison, AL 35758

Contact: [krisdkul@hotmail.com](mailto:krisdkul@hotmail.com), 256-682-5117

This event occurs rain or shine. We reserve the right to cancel in extreme circumstances. In that event, there will be no refunds, and your entry fee will be donated to scholarships for youth in need that want to participate in Madison Youth League Sports.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
D/O/B \_\_\_\_\_ Age as of December 9 \_\_\_\_\_  
Male \_\_\_ Female \_\_\_

### TEE SHIRTS

SHORT SLEEVE T-shirts—Adult Sizes (circle one)

M L XL XXL

SHORT SLEEVE T-shirts – Child Sizes (circle one)

S M L XL

**10K Run Entry Fee** Race starts at 7am

\$12 10K Run Through the Roses until January 31 \_\_\_\_\_

\$15 10K Run Through the Roses until March 31 \_\_\_\_\_

\$20 10K Run Through the Roses until September 5 \_\_\_\_\_

**5k Run Entry Fee** Race starts at 9:00am

\$12 5K Run Through the Roses until January 31 \_\_\_\_\_

\$15 5K Run Through the Roses until March 31 \_\_\_\_\_

\$20 5K Run Through the Roses until September 5 \_\_\_\_\_

TOTAL AMOUNT ENCLOSED\$ \_\_\_\_\_

Make checks payable to: Madison Run Through the Roses

RACE WAIVER: I, individually, (and/or as a parent, and/or guardian of the named minor) for and in consideration of acceptance of this entry in the aforementioned event, do hereby release, remise, waive, and forever discharge the City of Madison, AL and any and all other supporting groups of this said racing event, together with all their officers, agents, officials and employees, from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of, or relating to any injury, illness, loss, or damage, including death, relating to participation in this event. In addition, I agree that my participation in this event requires that I will not participate with roller blades, baby joggers, skateboards, animals, or anything which the race director deems dangerous to myself or other participants and that the race director may remove me from this event for a violation of said policy. I further grant permission to this race and the organization conducting the race and/or agents authorized by them to use any photographs, videotapes, motion picture, recordings, and any other record of this event for any purpose. I also agree that if the event is cancelled for any reason that all entry fees are non-refundable.

Signature (Required to process this application)

\_\_\_\_\_  
Parent/Guardian Signature (if under 18)

## Contact Us

Run Through the Roses

For more information about the race, please don't hesitate to contact us using one of the following methods:

Email: [krisdkul@hotmail.com](mailto:krisdkul@hotmail.com), 256-682-5117

Facebook: <http://budurl.com/RunRoses>

Twitter: RoseRaceRun