

Washington Catholic Freaky 5k Run/Walk & Kids Fun Run

Please print legible and complete the entire form. More than one entry may be mailed together with the appropriate fees. Please make all checks and money orders payable to CCW.

October 29, 2016 Costumes encouraged!



First and Last Name: _____

Age: _____ Date of Birth: ____/____/____ Male Female

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

T-Shirt Size

Youth S Youth M Youth L Adult S

Adult M Adult L Adult XL Adult XXL

Registration begins at 8:00AM. Race begins at 9:00AM. Entry Fees: \$20.00 if registered by October 14th \$25.00 after registration date (kids 12 and under \$10.00)

We can't guarantee shirt availability after October 14th.

Race Waiver: I hereby for myself and my heirs, and executors, waive and release any claim for damages that I may have against all sponsors, volunteers, and race officials for any and all injuries incurred by me during or because of the event. I certify that I have prepared for the event, and adequate physical condition to compete in this event. I further grant permission to this race and the organization conduction the race and or agents authorized by them to use any photographs, videotapes, motion picture, recordings of any other record of this event for any purpose. I also agree that all entry fees and non-refundable and that this entry is non-transferable. Thank you for your participation.

Signature _____ Date: _____

Parent/Guardian Signature, if under age 18: _____

Send completed entry forms and payment to:

Washington Catholic Elementary School
310 NE 2nd Street
Washington, IN 47501

Awards will be given to overall male and female runners.

The race will begin and end at Daviess Community Hospital Clinic parking lot at the corner of 14th St and Grand Ave

The kids fun run will be 1 mile route starting at the same place as the 5K.

