

Mail-in Registration Form

Slattery's Turkey Trot Five Miler

November 20, 2016

Make checks payable to:
Slattery's Turkey Trot

Must be postmarked by November 14, 2016 or dropped at Slattery's Restaurant and Bar, 21 Cully Street, Fitchburg, by EOB, November 18.

Mail entry form to:
Slattery's Turkey Trot
Slattery's Restaurant
21 Culley Street
Fitchburg, MA 01420

FILL OUT THIS FORM, PRINT IT, SIGN IT, MAIL IT

Name:	
Address:	
City, State, Zip:	
Daytime phone:	
Date of birth:	
Age on race date:	
School or Club:	
Check your gender:	MALE FEMALE
Check your event:	5 Mile Run 5 Mile Walk
Entry Fee:	Entry for adults mail-in form: \$25 \$ _____ (Race Day Fee will be \$30.00) TOTAL ENCLOSED \$ _____

Waiver must be read and signed before mailing:

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race, including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of application, I, for myself and anyone entitled to act on my behalf, waive and release Slattery's Restaurant and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. All fees are nonrefundable.

Signature

Date

Parent's Signature if under 18