

# Run your Mouth 5k Run/Walk

Runner Registration may also be completed online at [www.werunevents.com](http://www.werunevents.com)

Run your Mouth 5k Run/Walk 8:45

Kids Dash 8:30

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

MI: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE ON RACEDAY: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADDRESS:

\_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

RACE DAY EMERGENCY CONTACT (NAME AND PHONE):

\_\_\_\_\_

**\*\*\* CIRCLE EVENT: 5K Run/5K Walk or Kids Dash**

**\*\*\* CIRCLE SHIRT SIZE: ADULT SM, MD, LG, XL, XXL**

**CHILD SM, MD, LG, XL**

IN CONSIDERATION FOR ACCEPTING MY ENTRY IN THIS RACE, I FOR MYSELF, MY HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE AND RELEASE FOREVER ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I MAY HAVE AGAINST THE ORGANIZERS AND SPONSORS OF THIS EVENT. I ALSO RELEASE THE ABOVE NAMED FOR ALL CLAIMS OF DAMAGE DEMANDS, AND ACTIONS IN ANY MANNER DUE TO ANY PERSONAL INJURIES, PROPERTY DAMAGE, OR DEATH SUSTAINED AS A RESULT OF MY TRAVELING TO AND FROM AND MY PARTICIPATION IN SAID RACE. I ATTEST AND VERIFY THAT I AM PHYSICALLY FIT AND HAVE SUFFICIENTLY TRAINED FOR THE COMPETITION OF THIS EVENT. IN FILLING OUT THIS FORM, I ACKNOWLEDGE I HAVE READ AND FULLY UNDERSTAND MY OWN LIABILITY AND ABILITY.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

(Parent signature if under the age of 18.)

**Overall (top 3)**

**Top Masters (top 3)**

**Top Grand Masters Age Groups (top 3)**

Age Groups : 9 & Under, 10-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & Older