

Four Lakes 10k 2009

LAST NAME _____

FIRST NAME _____

MALE FEMALE AGE ON AUG 23/09 _____

ADDRESS _____

CITY _____

PROV _____ POSTAL CODE _____

TELEPHONE _____

EMAIL _____

CATEGORY: 19&U 20-29 30-39
 40-49 50-59 60-69 70+

ENTRY FEE:

\$15 per person by Aug 22; \$20 on race day.

BC Athletics 'Athlete' members deduct \$3.

2009 BC Athletics # _____

WAIVER—MUST BE SIGNED BY PARTICIPANT OR PARENT/GUARDIAN IF UNDER 19:

In consideration of you permitting me to participate in this event, I hereby, for myself, executors, administrators and personal representatives, release the organizers of this event, their agents, SCRD, B.C. Athletics, volunteers and the event sponsors from all liability, and I waive, as against the organizers, agents, SCRD, B.C. Athletics, volunteers and event sponsors, all claims of any kind whatsoever I may have for personal injuries or property losses suffered by participation in this event. I certify that I have full knowledge of the risks involved in this event and I am physically fit and able to participate, and that unless indicated to the contrary by the signature of parent/guardian below, I am 19 years or older.

SIGNATURE _____ DATE _____

TO ENTER:

Mail this form by August 15 to: 8155 Westwood Road, Halfmoon Bay BC V0N 1Y1

or Fax to 1-604-885-8849 from August 16-21 and pay on race day

Or register race day at the start 7:15–8:15am