



REGISTRATION FORM

First Name: _____

Last Name: _____

Address / City: _____

Postal Code: _____

Phone Number: (____) _____ - _____

E-mail Address: _____

Age on race day: _____ Sex: M F

5K Run / 2K Walk (please circle one)

Please indicate t-shirt size:

Small Medium Large X-Large

Tax Receipts are issued for donations of \$10.00 or more. Make cheques payable to Easter Seals Ontario. Receipts will not be issued for \$30.00 race fee.

Waiver: I know that running/walking is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I assume any and all risk associated with running/walking the event including but not limited to falls, contact with other participants, the effects of the weather including high heat humidity, the conditions of the roads, all such risks being known and appreciated by me. Knowing these facts, in consideration of the Event Sponsors, volunteers and organizers and sponsors of the run are exempt from liability for any damages sustained & any injury & loss, including personal & property loss arising from any cause whatsoever, including negligence. I hereby acknowledge that I have read this waiver and I understand it's terms.

Participant Signature: _____

Payment info:

Cash \$ _____ Cheque \$ _____ Fee waved (\$30 or more in fundraising) \$ _____

Credit Card \$ _____ (VISA/ MASTERCARD/ AMEX)

Credit Card Number: _____

Expiry Date (MM/YY): _____

Signature of Card Holder: _____