



www.krra.org/twosome

In support of the:
**Kingston Food Sharing Project
 & Special Olympics Ontario**



2019 KRRR Race Series Event #2 <h1 style="text-align: center;">Twosome 5km Run</h1> Sunday, February 10, 2019, 10:30 am		LOCATION! Army Navy Air Force (ANAF) Unit 377, 317 Gore Road, Kingston, ON
Technical Socks guaranteed to first 120 registered	Great Draw Prizes Course, Km Distances verified	All runners (including "onesomes") qualify for draw prizes and KRRR Series points
		Medals Top 3 teams Overall (Male/Female) Top 3 Combined Age Category (< 30, 30-39,..., 100-109, 110+) (M/F) Top Team Male/Male and Female/Female

ALL Kids 15 and under pay KRRR Member Prices!! If you would like a teammate go to the website and email us!!

Sunday Feb 10 (9:15 am) Registration and race kit pick up at ANAF Unit (10:30 am) 5km Race Begins (11:30 am) Awards/Draws/Food & Beverages
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Runner #1 Gender: _____ Date of Birth (m/d/yr) _____ Name: _____ Street: _____ Postal Code: _____ City: _____ Phone: _____ Email: _____ Please Sign Waiver Below Check Price Category No Tax Receipt with \$15 Tax Receipt KRRR Member Prices: <input type="checkbox"/> \$30 <input type="checkbox"/> \$40 Non Member Prices: <input type="checkbox"/> \$40 <input type="checkbox"/> \$50 *Tax receipt issued by KFSP *** NO REFUNDS *** *All prices increase by \$5 on Feb 1st Check Requested Sock Size: <input type="checkbox"/> Small (F5-8) <input type="checkbox"/> Medium (M7-9.5, F8.5-10.5) <input type="checkbox"/> Large (M10-12, F11-13) <input type="checkbox"/> Teammate with _____ (if registering separately)	Runner #2 Gender: _____ Date of Birth (m/d/yr) _____ Name: _____ Address: <input type="checkbox"/> same as Runner #1, or: Street: _____ Postal Code: _____ City: _____ Phone: _____ Email: _____ Check Price Category No Tax Receipt with \$15 Tax Receipt KRRR Member Prices: <input type="checkbox"/> \$30 <input type="checkbox"/> \$40 Non Member Prices: <input type="checkbox"/> \$40 <input type="checkbox"/> \$50 *Tax receipt issued by KFSP *** NO REFUNDS *** *All prices increase by \$5 on Feb 1st Check Requested Sock Size: <input type="checkbox"/> Small (F5-8) <input type="checkbox"/> Medium (M7-9.5, F8.5-10.5) <input type="checkbox"/> Large (M10-12, F11-13)
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WAIVER: In consideration of your accepting my entry, or the entry of my child or ward, I, for myself, my heirs, my child or ward, my executors, and administrators of those of my child or ward, do hereby release and forever discharge the Corporation of the City of Kingston, the Kingston Road Runners Association, Kingston Police Volunteers, the ANAF Unit 377, the race directors and race committee, sponsors or their representatives, agents and employees, competitors and persons associated with the event from and against any kind of actions, claims and costs with respect to death, injury, loss or damage, occurring prior to, during or subsequent to the event, to my person or property however caused and not withstanding that the same may have contributed to or occasioned by the negligence of any of the aforementioned.

Signature: _____ Date: _____ Signature: _____ Date: _____
 (Runner #1) (Runner #2)
 Signature of Parent/Guardian Signature of Parent/Guardian
 (if entrant is under 18 years) (if entrant is under 18 years)

Please make cheques payable to "KRRR" and mail to KRRR, c/o Runner's Choice, 56 Brock Street, Kingston, ON, K7L 1R9

Bib# (office use only)