

EVENT INFORMATION

Date:

Saturday, June 1, 2019

Location:

Starts and ends on Judson Street

Free Kid's Dash:

8:30 - 8:45 a.m.

5K Fun Run Start Time:

8:45 a.m.

Weather:

Race will take place under all weather condition with the exception of lightning.

Payment must accompany the signed registration form.

FUN RUN SHIRT ORDER

Male Female

T-SHIRT SIZES

Adult	Youth
<input type="checkbox"/> XS	<input type="checkbox"/> S
<input type="checkbox"/> S	<input type="checkbox"/> M
<input type="checkbox"/> M	<input type="checkbox"/> L
<input type="checkbox"/> L	
<input type="checkbox"/> XL	

Please complete and return the application.
One entry form per individual must be completed.

First Name M.I. Last Age

Address

City State Zip

E-mail Phone

Pre-Registration

Single Entry \$10

Family Entry \$25

(3 or more entries)

Day of Race Registration

Single Entry \$15

Family Entry \$30

(3 or more entries)

Shirts are only guaranteed to the first 100 entries. **Registrants that sign up before May 15 are guaranteed requested shirt sizes.** Those that register after May 15 are asked to select shirt sizes, but due to shirt ordering lead times - may not receive requested shirt.

Method of Payment (make checks payable to "Gig Harbor Chamber of Commerce")

Cash Check CC _____ _____ _____ _____
Exp. Zip Sec. Code

Liability waiver must be signed by all entrants, or by parent, or guardian if entrant is under 18. In consideration of your acceptance of this entry, I, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release, the Gig Harbor Chamber of Commerce, Maritime Gig Festival, and/or the City of Gig Harbor and any and all sponsors and their representatives, successors, and assigns from any and all rights and claims for damages I may have arising out of or any injuries and illnesses suffered by me in this event, including those which may be attributable to weather conditions. I attest and verify that I will participate in this event as a footrace entrant, which I am physically fit and have sufficiently trained for the completion of this event, and a licensed medical doctor has verified my physical condition. Further, I hereby grant full permission to any and all of the publicity and/or promotional purposes without obligation or liability to me.

**I have read the entry information provided and certify my compliance by my signature below.
I understand entry fees are nonrefundable.**

Applicants Signature Parent/Guardian (if applicant is under 18) Date

To be completed by GHCC Staff:
Date rcvd: _____ Amount rcvd: _____
Write-up rcvd: _____ Insurance rcvd. _____

Questions? E-mail: sczuleger@gigharborchamber.com
Please complete this form and return it along with all requested application materials to: