

REGISTRATION FORM 2017 Flight of the Vampire Race

Saturday, October 28, 2016
American Legion, Brevard, NC

Please print clearly and complete all items below

NAME: _____

ADDRESS: _____

CITY-STATE-ZIP: _____

EMAIL: _____

HOME PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

DATE OF BIRTH: _____ AGE: _____
Month Day Year Race Day

GENDER: M F

RACER TYPE R W
circle one: Runner Walker

CIRCLE T-SHIRT SIZE:
S M L XL 2XL(Add \$2)

Entry Fee is non-refundable and non-transferable.
U.S. Funds ONLY

Make & mail check with form to:
BREVARD ROTARY FOUNDATION
p.o. box 1213, Brevard, NC 28712

ENTRANCE FEES

for timed running and walking events:

1K: Children's fun Run: \$10: _____
5K: Ages 6-18 \$25 _____
After Oct 20 \$30 _____
5K: Ages 19-64 \$30 _____
After Oct 20 \$35 _____
5K Seniors 65 & over \$25 _____
After Oct 20 \$30 _____
10K: Ages 6-18 \$30 _____
After Oct 20 \$35 _____
10K: Ages 19-64 \$35 _____
After Oct 20 \$40 _____
10K Seniors 65 & over \$30 _____
After Oct 20 \$35 _____
Corporate Teams, 5 or 10K \$400 _____
After Oct 20: \$450 _____

Active Military, 5 or 10K Free _____

For 2XL T-Shirt - Add \$2: _____

Extra T-shirts: \$10. size _____

NO T-SHIRTS AFTER OCT 20 DEADLINE

TOTAL: \$ _____

Check#: _____

SORRY, NO CREDIT CARDS

More info: brevardrotary.org/races & Rangerpaulhoff@aol.com for group discounts

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY AND SIGN BELOW BEFORE RETURNING THIS FORM: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained.

I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in these events including, but not limited to, falls, contact with other participants, the effects of weather and temperature, traffic and the condition of the road, and all such risks being known and appreciated by me. **NO BIKES OR BABY STROLLERS WILL BE ALLOWED ON THE COURSE DUE TO THE RISK ASSOCIATED WITH THE RACE COURSE NOT BEING CLOSED TO VEHICULAR TRAFFIC.** Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself (and for anyone participating who is under my legal authority, including minors), as well as on behalf of my heirs and assigns, do hereby fully and completely discharge, quitclaim and release all members, volunteers and agents of the Brevard Rotary Club, Inc. and Brevard College, from any and all claims or liabilities of any kind arising out of my participation (and the participation of anyone under my legal authority, including minors) in this activity even though liability may arise out of negligence or carelessness on the part of the persons or classes of persons designated in this waiver.

I grant permission to the Brevard Rotary Club, Inc., to use any photographs, motion pictures, recordings and other records of my participation (and the participation of anyone under my legal authority, including minors) in these events for any purpose.

Participant's Signature

Date

Parent/Guardian Signature

