

2017 Columbus Mother's Day 5K Run/Walk Entry Form

Mother's Day 5K Event Date is Mother's Day, Sunday, May 14, 2017. Event Start Time is 8:00am

(On-line Registration is also available for the 5k Run/Walk at columbusmothersdayrun.com.)

Entrant: First Name _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip _____

E Mail Address: _____ Best Phone Contact #: _____

Gender (circle Female): Male Female Date of Birth: _____ Age: _____

Unisex Short Sleeve Shirt

Youth Sizes (circle one): S M L

Or Adult Sizes Unisex Cut (circle one): S M L XL 2XL+\$2.00 3XL +\$2.00

\$30 entry fee through March 6th; after March 6th: \$32; after April 22nd: \$35. There is an automatic \$5.00 discount for 13 and under; and 60 and older entries. Additionally, there is a group sign up (4 or more same time sign up) discount of \$5.00 per runner/walker.

Full information on charities benefitting from this race can be found on columbusmothersdayrun.com website.

Mail In Entry: Please make check payable to (and mail to) Phoenix Events, 1180 Regency Drive, Columbus, OH 43220.

Waiver Section:

Waiver Area (needs filled out and signature)

By participating in this Event, I do so at my own risk. I assume all risk of injury, illness, damage or loss to me or my property or my children, which might result, including without limitation, any loss or theft of personal property. I consent to medical treatment in the event of injury, accident and/or illness during the Event. I agree on behalf of myself (and my personal representatives, heirs, executors, administrators, agents and assigns) to release and discharge the organizers of this event, its principals, its officers & directors, its employees, all sponsors and their representatives and employees from any and all claims or causes of action (known or unknown) arising out of their negligence. I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a release of liability. By my signature below, I am waiving any right that I may have to bring legal action to assert a claim against any and all Event sponsors for their negligence. I hereby grant full permission to any and all of the foregoing to use my name and likeness in any broadcast, telecast, video or print media reporting or advertising of the Event without compensation.

Name: _____ Signature: _____ Date: _____

Parent or Guardian Signature if entrant is 17 or under: _____

\$Amt. Enclosed _____ Please make 5K run/walk entry check payable to Phoenix Events and mail to 1180 Regency Drive, Columbus, OH, 43220. Questions? Email: columbusmothersdayrun@gmail.com