~ Run Domestic Violence Out of Town ~

RACE APPLICATION

Eliza's Helping Hands, Inc. 5K Race/Walk

Support Victims of Domestic Violence & Sexual Assault

Sunday, September 11, 2016

Main St. Roundabout

Registration & Race Packet P/U: 8:00am

Race Starts: 9:00am

Online Registration: www.elizashelpinghands.org/get-involved/events/run-domestic-violence-out-of-town-5k/

(Ends at 6PM on 9/7/2016)

PARKING: YWCA overflow, Old Salem Visitor Center, Carolina's Vineyards & Hops

Check one box below:

- ☐ 5K Race/Walk: **$25.00/Adult** (Before August 31st)
- ☐ Between Sept. 1st & Sept. 11th: **$30.00/Adult**
- ☐ Military: **$15.00** (with ID)
- ☐ Students: **$15.00** (with ID)
- ☐ Children (6-12 Years): **$10.00**
- ☐ 5 Years and Under**: FREE**

T-shirt size? (FREE to the first 300 runners ~ Register early to guarantee your size.)

☐ Sm. ☐ Med. ☐ Lg. ☐ XL

Checks Payable To:
Eliza's Helping Hands, Inc.
1225 East 5th Street, Suite 100 | Winston Salem, NC 27101
Phone: (336) 865-0389 | Fax: (336) 283-0777

Post-Race Activities (10:00 a.m. – 12:00 p.m.): Food Trucks, Health & Wellness Activities & Demos, Face Painting, Balloon Artist, Local Vendors, and more…

Name (One Person Per Form):

_____ _____

Last First MI TEAM Name

Male ____ Female ____ Date of Birth _____ Age _____
MM/DD/YY

Address

_____

Street

_____ _____

City State ZIP

Daytime phone: ( ) ____--_____ Email: _____

WAIVER (Please read before signing)

I know that participation in this event is a potentially hazardous activity. I will not enter and participate unless I am medically able and properly trained. I agree to abide by any decision of any race official as to my ability to safely complete the event. I assume all risks associated with this event, including but not limited to falls, contact with other participants, and effects of weather including high heat and humidity, traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the City of Winston Salem, Eliza's Helping Hands, Inc., Community Intervention & Educational Services, Twin City Track Club, race officials, volunteers, and all sponsors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the aforementioned to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purposes. I know that bicycles and in-line skates are not allowed on the course. Please use discretion with bringing dogs, and using baby strollers and baby joggers in the race.

_____

Signature of Participant Parent's Signature (For Minors)

Date: _____