



SUMMER CAMP 2010

Registration

June 7-11, 2010

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ Email: _____

Age: _____ Grade completed _____ School: _____

Emergency Contact/Phone # _____

Medical Conditions/Allergies _____

T-Shirt Size (circle one):

Youth

Small Medium Large

Adult

Small Medium Large

Waiver and Release:

I know participating in any event or physical activity is potentially hazardous and dangerous. I am in adequate physical condition to participate. 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 participation in this event including, but not limited to: illness, falls, contact with other participants, the effects of the weather. All such risks are known and appreciated by me. Having read this waiver, I waive and release GIRLS RUN, Inc., its founders, organizers, volunteers, sponsors and charitable recipients from all claims or liabilities of any kind arising out of my participation in this event. I agree and accept that the entry fee is non-refundable and non-transferable. I grant permission to all of the aforementioned to use any photograph, recording or any other record of this event for any legitimate purpose without charge.

Signature of Parent or Legal Guardian: _____

CAMP TUITION: \$150

Includes SOLE IMPACT Registration, Camp Supplies, T-Shirt and Camp Activities

