FIT-TASTIC ENTRY FORM – SPRING 2012

One person per entry ONLY • Registration also available at Active.com

FIRST NAME _____

LAST NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE (preferred) _____ **AGE** _____

DATE OF BIRTH _____ **MALE** _____ **FEMALE** _____

EMAIL ADDRESS (write clearly) _____

TECH-SHIRT	MEN	S	M	L	XL	XXL
(CIRCLE SIZE)	WOMEN	S	M	L	XL	

REGISTRATION **$75, $70 if received before March 1st**

MAKE CHECKS PAYABLE TO: **RACE VENTURES, INC.**

MAIL TO: **FIT-TASTIC**
C/O CAPITAL RUNWALK
430 WOODBURN RD.
RALEIGH, NC 27605

NOTE: ONLY REGISTERED PARTICIPANTS ARE ALLOWED TO PARTICIPATE IN WORKOUTS. WE RESERVE THE RIGHT TO REFUSE ADMISSION TO ANYONE WE BELIEVE POSES A RISK TO GROUP SAFETY.

WAIVER: I understand that participating in this program is potentially hazardous, and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the program, during the program, or while I am on the premises of the program. I also am aware of and assume all risks associated with participating in this program, including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions 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 my heirs and executors, and anyone entitled to act on my behalf, hereby waive, release and forever discharge the program organizers, sponsors, promoters, Active.com and each of their agents, representatives, successors and assigns, and all other persons associated with the program, for my all liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this program. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise. I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this program. I understand that the entry fee is non-refundable and non-transferable.

_____

SIGNATURE **DATE**

_____

SIGNATURE OF PARENT OR GUARDIAN IF UNDER 18 **DATE**