

Circle the distance for which runner is participating.

5k	10k	1/2 Marathon
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<input type="checkbox"/>	4th of July
<input type="checkbox"/>	Ridge Run
<input type="checkbox"/>	Holiday Run

ALL PARTS OF THIS FORM MUST BE COMPLETED TO BE PROPERLY REGISTERED FOR THIS EVENT.

	FIRST	LAST	PLEASE WRITE IN BLOCK PRINT FOR LEGIBILITY
Name			
Street Address (or PO Box)			
City			
State			
Zip			
Phone			
M/F (Circle One)	Male	Female	
Birth Date	Day	Month Year	
Age			
eMail Address			
Paid by	<input type="checkbox"/> Check / <input type="checkbox"/> Cash (Circle one) Amount: \$		

Make Check payable to the **Ridgefield Runners**

Release: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am physically fit, 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 this event including, but not limited to: falls; contact with other participants; the effects of the weather; including high heat and/or humidity; traffic; and the 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 anyone entitled to act on my behalf, waive and release Ridgefield Runners, all sponsors, advertisers, their representatives, and successors, their officers, directors, agents, and employees and volunteers from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature: _____ **(parent, if under age 18)** **Date:** _____

Race #: _____ (A Race Official will assign one to you.)

www.RunRidgefield.com