

2010 Aberdeen Family YMCA Bull Run Entry Form



Category: (choose one)

Event: (choose one)

Name _____ Home Phone # _____

Male___ Female___ Age on 12/31/10_____

Address _____

City _____ State _____ Zip _____

Emergency Contact _____

Phone # _____

Shirt size: (choose one)

Are you a YMCA Member? (yes or no) _____

PARTICIPATION WAIVER

Race Release on behalf of myself, my heirs, executors and administrators, I hereby waive and release any and all rights to and claims for damages that I may have against the Aberdeen Family YMCA or their agents, employees or volunteers and any facility used for this race and for any and all injuries which I may suffer in connection with my participation in this event.

BY SUBMISSION OF THIS FORM I AM ACCEPTING OF THE ABOVE STATEMENTS. WAIVERS, AND LIABILITY.

On-line registration must be submitted by a parent or guardian if participant is under age 18.