



# River Run For Orphans



## Colorado Springs

October 1, 2011

1 Mile Starts at 10:00 AM

5K Starts at 10:30 AM

Name \_\_\_\_\_

Age \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Sex M/F \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Affiliation \_\_\_\_\_

T- Shirt Size : **Circle** - Youth or Adult    **Circle** ó S M L XL

**T- Shirts guaranteed only for Pre- Registered Participants**

**Events: Please select which event you will be in:**

1 Mile Run

5K Run

**Fees:** \$25.00 per race

**Children 12 and under:** \$15.00

**Make Checks Payable to Rocky Mountain Calvary**

**Pre – Registration Closes – Sept. 25<sup>th</sup>**

Drop registration forms and money at:

Rocky Mountain Calvary, or

Race day registration 9:00 ó 10:00 AM

More Info: [info@riverrunfororphanscoloradosprings.org](mailto:info@riverrunfororphanscoloradosprings.org)

**Participation Waiver: (must be signed)**

**Waiver agreement:** In consideration of the foregoing, I myself, my heirs and personal representatives, waive and release any and all rights and claims for damages against the city of Colorado Springs, Rocky Mountain Calvary Church and the River Run for Orphans and all other sponsors and their representatives of any and all claims of damages, demands, actions whatsoever in any manner, as a result of my participation in said race. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and my physical condition has been verified by a licensed medical doctor. Although the undersigned acknowledge that there is no obligation of any person to provide them with medical care during or after the activities, in the event emergency care is rendered to the undersigned, they thereby consent to such care. Further I hereby grant full permission to any and all of the foregoing to use my likeness for any purpose whatsoever. I understand that my entry fee is non-refundable and numbers are non transferable. By providing my electronic signature I am attesting that I am above the age of 18, of sound mind and that I agree fully with the above - delineated waiver.

Participants Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's Signature if under 18 \_\_\_\_\_