

**First Annual
Spring Chicken Run**
Registration Form

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Gender: M F Date of Birth: _____

Daytime Phone Number: _____ Eve Phone Number: _____

Email address: _____

Shirt Size: (Circle One) Adult: Sm, Med, Lg, XL

I understand the risks involved with participation in this event, including, but not limited to, muscle strain/sprain, and/or heat related disorders.

Participant Signature

Parent/Guardian Signature (If participant is under 18 years of age)

*You must be 15 years old to participate.

The race will be run rain or shine. It will only be delayed or cancelled in the event of a lightning storm.

In the event of a large turnout of participants, we will hold a race at 8 am and 9 am, you will be notified if this occurs

