Benefit for the Family of Emily Rose Adamczak

5K RUN/WALK & KIDS SPRINT

SATURDAY • JULY 18 • 9:00 AM • RUSSELL PARK • AKRON

Registration from 7 am to 8:30 am

MINIMUM DONATION KIDS SPRINT 8 and Under FREE • Adolesence up to 2009 Grads $5 Adults $10. T-Shirts sold seperately, while supplies lasts!!!

LOCATION RUSSELL PARK, Main Street, AKRON, NEW YORK

MAKE CHECKS PAYABLE TO Emily Rose Memorial (US Funds Only)
Entry Fee is NON-REFUNDABLE & NON-TRANSFERABLE

REGISTRATION Packet Pickup & On-Site Registration: 7:00-8:30 a.m. Race Day
Applications on: www.AkronsEmilyRose.org or www.PETraining.com

RETURN ENTRIES TO Kris Beyer
7023 Sandhill Road, Akron, NY 14001

INFORMATION Kris Beyer @ (517) 206-0075
or 716-542-4148 (H)

AWARDS RANDOM AWARDS! Best Costume, Most Spirit, Largest Team, etc.

CAUTION BEWARE!! There will be traffic on the roads at all times.

PLEDGE FORM
FREE REGISTRATION & T-SHIRT with a $50 Minimum Pledge
Prize for most Pledges!

NAME	AMOUNT
	$
	$
	$
	$
	$
	$
	$
TOTAL	$

Attach additional pages if needed.

KIDS!! UNLIMITED USE OF KIDZPLAY INFLATABLES $5 (WRISTBAND)

PLEASE PRINT---------- ENTRY FORM MAY BE PHOTO COPIED ----------

NAME | **ENTER ME IN THE** ☐ WALK ☐ RUN ☐ KIDS SPRINT | ☐ MALE ☐ FEMALE

ADDRESS | **CITY** | **STATE** | **ZIP**

PHONE # | **BIRTH DATE:** / / | **AGE ON JULY 18, 2009:**

Shirt Size (Circle One) M L XL XXL | **EMAIL ADDRESS:** _____

In submitting this entry,I, intendingto be legally bound for myself, my heirs, executors, and administrators, waive, release, and forever discharge any and all rights and claims which I may hereafter accrue to me against Kris' Physical Evidence, Inc., Village of Akron, Township of Newstead, Bank of Akron, Kidzplay, event sponsor, event volunteers and the directors, agents, successors and/or assignees for any and all injuries suffered by me at this event, while traveling to and from the Emily Rose 5K Run, Walk & Kids Sprint, or while participating in this event. I attest and verify I am physically fit and sufficiently trained for the competition in this event.

Signature: _____ **Date:** _____

Parent or Guardian (If Under 18) _____ **Date:** _____