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# The "MAGIC OF MARBLE"

## ~5K Entry Form ~ 1 Mile Fun/Run

~Saturday, April 8, 2017 ~ 9:00 A.M. ~ Blue Bell Central Park/Norton Avenue

\*Sylacauga Parks & Recreation\*

Limited to 75 Participants

Complete the registration form below and mail in by March 31, 2017 with your entry fee to Sylacauga Parks & Recreation, Attn: 5k Race, P.O.Box 1245, Sylacauga, Alabama 35150 – The registration fee is \$20 by April 7. On Race Day, the registration fee is \$25. Make checks payable to Sylacauga Parks & Recreation. For more information go to: [www.bbcomerlibrary.net/marblefestival](http://www.bbcomerlibrary.net/marblefestival) (Please Fill Out Completely and Neatly)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone# \_\_\_\_\_ Emergency Contact# for Race Day: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Shirt Size: (circle one) YL/AXS AS AM AL AXL AXXL

5K-Entry Fee - \$20 received by April 7, 2017 \$ \_\_\_\_\_

(entry fee \$25 on Race Weekend)

1 mile—Walk/Fun Run Fee: \$15 \$ \_\_\_\_\_

AMOUNT ENCLOSED: \$ \_\_\_\_\_

LIBABILITY WAIVER AND RACE AGREEMENT: I know that running or walking a road race is a potentially hazardous activity. I will not enter and run or walk unless I am medically able to do so and properly trained. I assume all risks associated with running or walking this event, including but not limited to the effects of weather, traffic, course conditions and course surfaces, falls, and contact with other runners, volunteers and spectators. I am aware that medical support for this event will be provided by volunteer personnel who may be called upon to provide assistance, including first aid, to me during or after the event. I authorize any such volunteer to assist me or to perform such assistance as in the opinion of such person may be necessary or appropriate. I understand that Sylacauga Parks and Recreation, Sylacauga Chamber of Commerce, City of Sylacauga, the sponsors, the volunteers, and all others assisting in the operations of the event and its supporting and related activities assume no responsibility or liability with respect to my participation in the run or in any related events. I agree to obey and accept the rules of this race and any related events as published or otherwise made known to me, and in consideration of the acceptance of my entry, I for myself and any person entitled to act on my behalf do hereby release Sylacauga Parks and Recreation, Sylacauga Chamber of Commerce, City of Sylacauga, all sponsors, volunteers, together with their employees, contractors, subcontractors, directors, officers, agents, attorneys and representative from all claims of liabilities of and any kind or character arising from my participation in this event or in any related activity, even though liability may arise from negligence for carelessness on the part of persons or organizations named in this waiver and release. I consent to the use of photographs, video, film and sound recordings of all marathon events for all legitimate purposes. I give permission to be contacted by the media.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Or Parent/Guardian Signature: \_\_\_\_\_

(Unsigned entries will not be accepted. Parents must sign for children under 18 years of age.)

Make checks payable to Sylacauga Parks & Recreation  
Mail to: P.O.Box 1245, (5K-Race) Sylacauga, AL 35150  
FORMS MUST BE RECEIVED BY: APRIL 7, 2017

