A RUNFIT PRODUCTION

All Proceeds to Benefit Pancreatic Cancer Research

5K Start 8:30 **Kids K:** 9:30 AM

Location: Tiguex Park - 1800 Mountain Road Northwest Albuquerque, NM 87104

Online Registration **https://www.eventbrite.com/e/pollys-run-2016-registration-21969753123**

MAIL TO:
Polly's Run
1800 Washington St. NE
Albuquerque NM 87110

EVENT ENTRY 5K Run/Walk ☐ Kids K ☐

Male ☐ Female ☐ Age on Race Day* ☐☐ Date of Birth MM ☐☐ / DD ☐☐ / YY ☐☐

Last Name

First Name

Mailing Address

City

State

Zip

Email Address

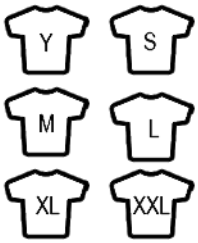
Citizenship

Daytime Phone

Champion Chip - (if applicable)

Fees	Before 5/28	After 5/28	Race Day 6/2
5K Run/Walk	$30	$35	$40
Kids K	$15	$15	$15
T-Shirt Only $12			

CIRCLE A T-SHIRT SIZE



Fee	$
Coupon Code	
AMOUNT ENCLOSED	$

Make Checks Payable to: RunFit

Payment Information

Cash ☐ Check ☐ MC ☐ Visa ☐ AMEX ☐

Credit Card Number

Expiration Date ☐☐ / ☐☐

Security Code*

*The Last 3 digits of the number in the signature panel on reverse side of credit card

Print Name on Account

Signature for Credit Card Date

LIABILITY WAIVER AND RACE AGREEMENT: Read this form carefully before accepting. By signing below you agree, warrant and covenant as follows; I know that running a road race is a potentially hazardous activity. I will not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event, including but not limited to the effects of weather, traffic, course conditions and course surfaces, fall 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 person providing me medical care to notify and release information about my medical condition to race officials. I authorize race officials to disclose this information to anyone requesting such information. I authorize and such volunteers to assist me or to perform such assistance as in the opinion of such person may be necessary or appropriate. I understand 2016 Polly's Run, governments of the City of Albuquerque, the sponsors, volunteers and all other assisting 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 to abide by the decision of any race official concerning my ability to safely complete the run. Having read this waiver and release, knowing these facts and in consideration of the acceptance of my entry, I for myself and and any person entitled to act on my behalf do hereby release the 2016 Polly's Run, the governments of the City of Albuquerque, all sponsors and volunteers together with their employees, contractors, subcontractors, directors, officers, agents, attorneys, and representatives from all claims of liabilities of any kind arising from my participation in this event or in any related activity, even though liability may arise from negligence or careless 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 race and related events for legitimate purposes. Athletes who participate in this competition may be subject to drug testing by the United States Anit-Doping Agency (USADA) in accordance with the IAFF Procedural Guidelines for Doping Control or the Polemic Movement Anti-Doping Code. Any substance taken by an athlete is at his/her own risk and may result in a positive sample. Information on drugs and drug testing may be obtained by calling the USADA Drug Reference Hotline at 800-233-0393 or visiting the USADA website. I give permission to be contacted by interested media. I also agree to pay $30.00 if I fail to return any timing chip at the conclusion of the race. I understand that entries are non-refundable.

Signature For Waiver (Signature of Participant or Parent/Guardian if under 18) Date