



**Event Date: August 28, 2016**

**Where: Starbucks**

*(NW of Starbucks on Tennyson Rd. NE)*  
12201 Academy Rd. NE  
Albuquerque, NM 87111

**Events:**    **10K Run** Starts at 8:15 a.m.  
                 **5K Run/Walk** Starts at 8:30 a.m.  
                 **Kids K** Starts at 9:15 a.m.

### EVENT REGISTRATION FORM

Please Print • OK to Photocopy • Race Number are NON-Transferable

First Name	Last Name	DOB / /	Age on Race Day	Gender <input type="checkbox"/> M <input type="checkbox"/> F
Address		City	State	Zip
Phone Number ( ) -	Email			

- 10K RUN**    **5K RUN/WALK - INDIVIDUALS**  
 **Early Registration (Until 8/14/16) \$30**  
 **Registration (After 8/14/16) \$35**  
 **Race Day (8/28/16) \$40**

- KIDS K – 11 and Under**  
**Early Registration (Until 8/14/16) \$15**  
**Race Day (8/28/16) \$15**

- 10K RUN**    **5K RUN/WALK - 65 or Older**  
 **Early Registration (Until 8/14/16) \$25**  
 **Registration (Until 8/14/16) \$30**  
 **Race Day (8/28/16) \$35**

- T-SHIRT SIZE**  
 YS    YM    YL  
 S    M    L    XL    XXL

- 10K RUN**    **5K RUN/WALK - 17 AND Under**  
 **Early Registration (Until 8/14/16) \$20**  
 **Late Registration (Until 8/14/16) \$25**  
 **Race Day (8/28/16) \$30**

**Payment Method:**    Cash    Check    Credit Card:    Mastercard    Visa    American Express

Credit Card Number	Security Code	Expiration
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<b>My Personal Donation:</b>	\$
<b>Total:</b>	\$
<input type="checkbox"/> <b>Enclosed is my check for:</b>	\$

\_\_\_\_\_  
*Signature*

**MAKE CHECKS PAYABLE TO: RunFit | MAIL TO: 12104 Palm Springs Ave. NE, Albuquerque, NM 87111**

**Waiver:** In consideration of your acceptance of my entry, I, for myself, my executors, administrators, and assignees, do hereby release and discharge the RunFit, City of Albuquerque, and all other sponsors and associates for all claims of damage, demands, actions whatsoever in any manner arising or growing out of my participating in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event, and I am physically fit and have sufficiently trained to participate in this event.

If, however, as a result of my participation in this race I require medical attention, I hereby give my consent to the authorized medical personnel of this race to provide such medical care as is deemed necessary by such authorized personnel. I also understand that in the event this race cannot be held as scheduled due to an act of God or circumstances beyond control, the race is not liable to refund any money paid by me to participate. Further, I hereby grant full permission to any and all of the foregoing to use my photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that the entry fee is non-refundable and that race numbers are not transferable

**Waiver (17 and Under):** If athlete is under age 18: This is to certify my son/daughter has my permission to compete in the Dam to Dam Run and related events, is in good physical condition, and that race officials have my permission to authorize emergency treatment if necessary.

\_\_\_\_\_  
*Signature*

**Event Information and Register Online at [www.irunfit.org](http://www.irunfit.org)**