

Event Date: November 26, 2015

Where: Rio Rancho Aquatic Center 745 Loma Colorado Blvd. NE Rio Rancho, NM 87124
Events: 10K Starts at 9:00 a.m. 5K Starts at 9:05 a.m. Kids K Starts at 10:15 a.m.



EVENT REGISTRATION FORM

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

First Name	_ast Name		Dов / /	Age on Race Day	Gender
Address		City	State	Zip	
Phone Number () -	Email				
10K RUN - ALL AGES Early Registration (Until 11/1/15) \$30 Late Registration (After 11/1/15) \$35 Race Day (11/26/15) \$40			KIDS K - ALL AGES Early Registration (Until 11/25/15) \$15 Race Day (11/26/15) \$20		
5K RUN or WALK - ALL AGES Early Registration (Until 11/1/15) \$30 Late Registration (After 11/1/15) \$35 Race Day (11/1/15) \$40			T-SHIRT SIZE		
Payment Method: Cash Check	🗌 Credit Card: 🗌 Ma:	stercard 🔲 Visa [] American Express		
Credit Card Number	Security	Code Expiration	My Personal Donati	on: \$	
			Тс	otal: \$	
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 City of Rio Rancho and Sandoval County, RunFit 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 Hobbler Gobbler and related events, is in good physical condition and that near officials have my permission to a the rise among the transmission to a structure the

 $condition, and that race officials have \ my \ permission \ to \ authorize \ emergency \ treatment \ if \ necessary.$

Signature

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Enclosed is my check for:

Event Information and Register Online at www.irunfit.org