



Aug. 17, 2019 8:00 AM Hancock Health/Wellness Center in McCordsville

Registration Form

Want to participate in the Path to Fitness 5K but you don't want to pay the service fee? You can use this registration form instead. One registration form is required per participant. Make checks payable to **Town of McCordsville. You must register by Aug. 5th to be guaranteed a t-shirt.**

I plan to: Run Walk in the 5K

I plan to: Participate in the one-mile fun run **(no t-shirt)**

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Date of Birth ____/____/____ (required)

Gender _____

T-Shirts will be provided to all registered **5K runners and walkers**. Those registering on race day will receive shirts on a first-come first-served basis. Available sizes are:

YOUTH: S M L **ADULT FEMALE:** S M L XL **ADULT MALE:** S M L XL XXL

Payment

<input type="checkbox"/>	Adult 5K Registration	\$25.00
<input type="checkbox"/>	One Mile fun run/walk	\$15.00
<input type="checkbox"/>	Youth 13 & Under	Free

I acknowledge that my participation in the McCordsville Path to Fitness 5K Fun Run/Walk involves a risk of injury, including bodily injury, and assume the risk for same. On my own behalf and on behalf of my heirs and legal representatives and to the fullest extent permitted by law, I hereby release and discharge the Town of McCordsville, Indiana and their respective elected officials, officers, employees, affiliates, members, agents and representatives, or and from any and all liability for injury, death, or damages and/or any other claims, demands, losses or damages, incurred by me in connection with any aspect of the McCordsville Path to Fitness 5K Fun Run/Walk.

If I am an employee of the Town of McCordsville, I acknowledge that my participation in the McCordsville Path to Fitness 5K Fun Run/Walk is completely voluntary and does not constitute part of my work-related duties. I understand that my decision to participate, or not participate, in this activity will not affect my job status.

Print Name _____ Date _____

Signature _____ Parent/Legal Guardian must sign if
participant is under the age of 18

For questions please **contact Tonya Galbraith at tgalbraith@mccordsville.org**. For more information go to the McCordsville Path to Fitness 5K Facebook Page at: <https://www.facebook.com/pathtofitness5K/>

Packet pick-up will be on Aug. 16th from noon to 6:00 p.m. at the McCordsville Town Hall or the day of the race at the Start/Finish Line at the Hancock Health/Wellness Parking Lot beginning at 7:00 a.m.

Send your completed form to: Tonya Galbraith, McCordsville Path to Fitness 5K, 6280 W. 800 N., McCordsville, IN 46055.