

Registration for CCS VIRTUAL FAMILY 5K FUN RUN/WALK

When: By November 14th
See back for instructions



Cost: \$25
Family Discount: \$5 each for 2 or more family members
All Proceeds benefit the Scholarship Fund

Name: _____

Address: _____

City/State/Zip: _____

DOB: _____

Phone Number: _____ Email: _____

Paid: \$25 (**Non refundable**) (Cash: _____) (Check#: _____)

Family member discount: \$5 _____

(INCLUDES Custom Race Shirt - Cotton Blend Style)

T-shirt Size: (Please Circle) YS YM YL

Adult S, Adult M, Adult L, Adult Xlg, Adult 2Xlg, Adult 3 Xlg

Waiver: I understand and agree that I am voluntarily participating in the Calvary Christian School Virtual Family 5K Fun Run/Walk at my own risk and my own request. I hereby waive all claims against the Calvary Christian School, Calvary Baptist Church, event sponsors, and their respective directors, employees, agents and volunteers for any injury that I might suffer related to the event. I also grant full permission for the free use of my name, picture and voice in any broadcast, print, web or other account of this event.

If participant is under age 18: This application must be acknowledged and submitted by participant's parent or legal guardian.

Signature _____
(Parent or legal guardian sign here if participant under the age of 18)

Date _____