

FAX TO 770.517.2286 OR EMAIL TO TURKEYS@HEALTHSPROUT.COM

OFFICIAL 2009 "CHASING THE TURKEYS" ENTRY FORM

FIRST & LAST NAME: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

AGE: _____ SEX: M F

T-SHIRT SIZE: XS S M L XL XXL

\$15.00 Pre-registration by October 28th
\$20.00 Late Registration (all ages) If a runner fails to show, his entry is non-refundable and will be considered a donation.

Make check payable to: "Chasing the Turkeys"
Mail to Chasing the Turkeys / 180 Towne Lake Parkwa y / Woodstock, GA 30188

In consideration of your accepting this entry, I, the assignee, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the "Chasing the Turkeys" 5K, or their sponsors, officials, workers, representatives, successors, assigns, for any and all injuries suffered by me at the event.

Signature of Participant Date

Signature of Parent or Guardian Date

DID YOU PAY ON PAYPAL? WHAT EMAIL ADDRESS DID YOU SEND FROM?
