

3rd Annual Harford CROP Hunger 5K Walk & Run

Saturday, October 9, 2010

8:30 a.m. – Registration

9:00 a.m. – Opening Ceremonies followed by Start of 5K Runners

Registration

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Tee shirt provided to participants with a minimum \$20 donation (\$25 the day of the event).

Please make checks payable to: CWS/CROP

For early registration, mail to: Harford CROP 5K
110 W. Bel Air Avenue
Aberdeen, MD 21001

STATEMENT OF CONSENT (Must read and sign)

I understand the risks involved in participating in the CROP Hunger Walk/Run and willingly and voluntarily accept these risks. I attest that I am physically fit and prepared for this event. In consideration of the acceptance of my entry, I for myself, my executors, administrators and assignees of, do hereby release and hold harmless and covenant not to file suit against the CROP Walk/Run sponsors, affiliates, subsidiaries, employees, race organizers, RASAC, and all other persons or entities associated with this event of all claims and damages, demands and actions whatsoever in any manner arising out of my participation in said CROP Hunger Walk/Run. I grant permission for the organizers to use photographs/images and quotations from me in accounts and promotions of CROP Hunger Walks and Runs.

Signature _____

Parent or guardian's signature if under 18 years of age:

Signature _____