RONALD MCDONALD HOUSE CHARITIES®
NORTHWEST FLORIDA
rmhpensacola.org

CARSON LOVELL INCORPORATED

Mail completed form to:
Ronald McDonald House
5154 Bayou Blvd
Pensacola, FL 32503

Phone: 850-477-2273
Fax: 850-477-7607

FIRECRACKER 5K ENTRY FORM

July 3, 2010

☐ Registration through June 11th $20
☐ June 12th to July 2nd $25

☐ Team of 10+ received together through June 11th $15 each

☐ Team of 10+ received together June 12th to July 2nd $20 each

☐ Race Day registration $30

Race Number
Official Use Only

RUN: ☐ (COMPETITIVE RUNNERS AND CASUAL JOGGERS)

WALK: ☐ (COMPETITIVE AND CASUAL WALKERS) *NO RUNNING, WALKING ONLY*

WHEELCHAIR: ☐

LAST NAME

FIRST NAME

MALE ☐ FEMALE ☐ SEX

AGE ON RACE DAY

BIRTHDATE MONTH DAY YEAR

TANK SIZE: *(Circle your choice)* SMALL MEDIUM LARGE X-LARGE

ADDRESS STREET INCLUDE APT. NO. AND/OR C/O

CITY ST ZIP CODE

PHONE NUMBER ___ - ___ - ____

E-MAIL

Release (Mandatory): I attest and verify that I am physically fit, and assume all the risks associated with participating in this event but not limited to falls, contact with other participants, the effects of the weather, traffic and conditions of the roads, all such risks being known and appreciated by me. I agree to abide by any decision of a race official relative to my ability to safely complete this 5K race. In consideration of your acceptance of my entry, I the undersigned, hereby remise, release and forever discharge the Ronald McDonald House, its sponsors, volunteers, agents and representatives thereof, and their successors, from any and all claims and damages whatsoever which I, my heirs, their executors and administrators have or may have against the Ronald McDonald House, it sponsors, agents, volunteers and representatives, by reason of any damages or injuries which may be incurred by myself while participating in this race or in any activities sponsored by this race. I further grant full permission to any agent foregoing to use photographs, video tapes, motion pictures, recordings or any record of this event for any purpose whatever. In witness whereof, I have here set my hand and seal this date.

SIGNATURE: _____ DATE: _____

(Signature of parent if entrant is under 18)

Questions? Contact the Ronald McDonald House at 850-477-2273 or events@rmhpensacola.org.
Additional offices in Okaloosa, Walton, and Bay Counties owb@rmhpensacola.org or 850-678-7243