THE REAL SQUEAL 5k & hog jog

PLEASE PRINT LEGIBLY

Name						 	
SexAge							
Complete Address						 	
Phone #							
E-mail						 	
Shirt Size (circle one)	S	М	L	XL	NONE		
Name of affiliation of Cl	ub o	r Tea	am				

Waiver (MUST BE SIGNED)

In consideration of your accepting this entry, I, the below signed, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against the race, and sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will participate in this event as a footrace, that I am physically fit and sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeness, as well as any photographs and amy record of this event in which I may appear for any legitimate purpose, including advertising and promotion.

Signature_____

Date_____

Parent or Guardian if under 18

NO REFUNDS WILL BE ISSUED FOR ANY REASON

Mail to: Lyons Main Street Attention Ginger Russell 134 NW Broad St. Lyons GA 30436 Application may also be dropped off at Lyons Main Street Office Call Ginger Russell 912-526-5128 for more information.