**Warpath to Wellness**

**5K Walk/Fun Run** *(Leoti, Kansas)*

**Registration Form – Deadline (August 15th, 2019)**

**Saturday, September 21st, 2019**

***Check one box below:***

🗖**5K** (3.1 mi.) Entry Fee $30.00 (includes t-shirt)

🗖**5K** (3.1 mi.) 12 & Under Entry Fee $15.00 (includes t-shirt)

🗖**Fun Walk/Run** (1 mi.) 8 & Under, 65 & Older – Free (No t-shirt)

***What is your t-shirt size? Check one box below:***

🗖Sm. 🗖Med. 🗖Lg. 🗖XL. 🗖XXL.

***Name*** *(please print) (Only one entry form per person)*

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Male \_\_\_ Female \_\_\_ Date of Birth \_\_\_\_\_\_ Age \_\_\_***

***Address***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_***

**Street City State Zip**

***Phone #:***

**WAIVER: (Read before signing)**

*I know that participation in this event is potentially hazardous activity. I assume all risks associated with this event, including but not limited to falls, contact with other participants, effects of weather including high heat, humidity, traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, I, for myself and anyone entitled to act on by behalf, waive and release all those associated with Warpath to Wellness group, and Wichita County Health Center, race officials, volunteers, and all sponsors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purposes.*

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_***

**Signature (Parent’s signature if under 18 years of age) Date**