



**Please Print Clearly and Legible

One form per person Fill out completely Athlete Name Age Gender M/FCity **Address** State Zip Code **Phone Email Event Name Event Distance** Registration Fee **Shirt Size (Please circle your size)** **Women's sizes not available at every race, please check event page Youth Sm / Youth Med / Youth Lg / Adult Sm / Adult Med / Adult Lg Adult XL / Adult XXL / Women's Sm / Women's Med / Women's Lg / Women's XL RELEASE: In consideration of this entry I waive any and all claims for myself and my heirs against race officials, Five Star NTP, its sponsors, agents, servants, representatives and assigns organizing and conducting this event. I hereby covenant not to sue, to release and discharge Matt of and from all claims, demands, rights and causes of action of whatsoever kind or nature arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injury, damage to property, and consequences thereof, resulting from my running and/or participating in said event. I further state that I am in proper physical condition to complete said event. Signed: Date:

Mail Checks to: 59 Hwy 9 South Dawsonville, GA

Make checks payable to: Five Star