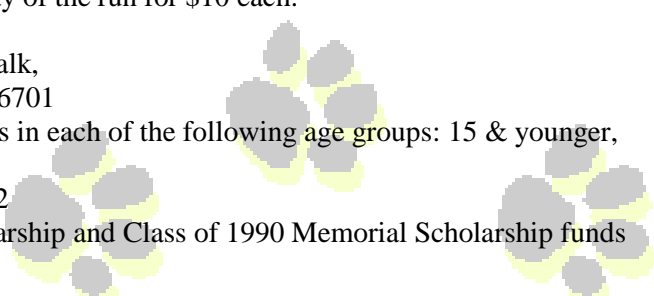




**People of all ages are invited to participate in  
this fun run/walk.**

Cut here and return the bottom portion along with registration fee to Class of 1990 5K Run/Walk, c/o Caron Alten, 15708 State Hwy 1 NE, Thief River Falls, MN 56701



**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** (    ) \_\_\_\_\_

**Age Group:** \_\_\_\_\_ **Circle gender:** Male Female

**Entry fee amount paid:** \_\_\_\_\_ **Shirt size:** \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Parent/Guardian Signature (required if Participant is under 18 years old): \_\_\_\_\_