

2017 TWILIGHT RIVER RUN

ONE ENTRY FORM PER PERSON

PHOTOCOPY AS NECESSARY

NAME: (LAST) _____ (FIRST) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SEX: ☐ Male ☐ Female AGE ON SEPTEMBER 21: _____

TELEPHONE: _____ EMAIL: _____

I am supporting this athlete _____ on the Sheldon XC Team

EVENT I AM ENTERING: 5K Run ☐ 5K Walk ☐**Shirt Options:**

Unisex Sizes: YL S M L XL XXL (Please Circle)

Make checks payable to Sheldon X-Country and mail to:Sheldon X-Country
2455 Willakenzie Rd
Eugene, OR 97401Thru 9/20 \$20 w/o shirt
Thru 9/20 \$25 with shirt
(while supplies last)
Increase \$5.00 day of race registrationBIB #

ENTRY FEE TOTAL \$ _____

MANDATORY WAIVER (Please read and sign below) I know that a road race/walk or wheelchair event is a potentially hazardous activity. I should not enter and participate in this event unless I am medically able and properly trained and have sufficient stamina to safely and successfully complete this event without harm or injury to myself. In consideration of the acceptance of my entry, my heirs, executors, administrators and assigns, waive, release and discharge any and all rights and claims for damages against the Twilight River Run race directors and designated race officials, Eclectic Edge Events, LLC, Sheldon High School, City Of Eugene, City of Eugene Parks & Open Space, and all other participating sponsors, agents and employees of such parties for all claims of damages, demands, actions, whatsoever in any manner arising from my participation in this event. I grant permission to all of the foregoing the use of any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

Signature (Parent/Guardian if under 18) _____ Date _____

PLEASE NOTE: Entry fees are **non-refundable** and non-transferable.