

# Memorial Day

## May 30, 2016

### Tuscarawas County Fairgrounds

**7:30 am – Event Registration**

**9:00 am – Race Start**

**Early Packet pick-up at United Way Building**

**Friday, May 27 12pm – 6pm**

**Saturday, May 28 10am – 12pm**



**REGISTER ONLINE**

**[www.colorsunited.org](http://www.colorsunited.org)**

#### Registration (check one):

\$20 fee until 5/1/16      Youth: (6-18)  
 \$25 fee thru 5/29/16       \$10 fee thru 5/29/16  
 \$30 fee day of event       \$15 fee day of event

Teams: (4+ people per team – submit all forms and \$ together)

\$15 fee until 5/1/16  
 \$20 fee thru 5/29/16  
 \$25 fee day of event

5 & under – FREE (no shirts)

#### Shirt Size (circle one):

**Unisex**      S   M   L   XL   2XL   3XL

**Youth**      M only

Register by May 13<sup>th</sup> to guarantee shirt

All proceeds support **United Way of Tuscarawas County**. Make checks payable & mail to: United Way of Tuscarawas County, P.O. Box 525, New Philadelphia, OH 44663

Name \_\_\_\_\_ Event Day Age \_\_\_\_\_ Sex **M** or **F**

Team Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**Waiver:** I, the undersigned, realize that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to me safely completing the event. Having read this waiver, and in consideration for you accepting my entry. I, for myself and anyone entitled to act on my behalf, waive and release **the United Way of Tuscarawas County & Dover-Phila Federal Credit Union, their directors, organizers, and all sponsors and representatives** and successors from all claims of liability of any kind arising out of my participation in the event. I hereby grant full permission to any or all of the foregoing to use photographs, video, motion pictures, recordings, or other record of this event for any legitimate purpose. All race entries are non-refundable.  
We reserve the right to reject entries.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature (required if child is under 18 years of age) \_\_\_\_\_

Date \_\_\_\_\_

Corporate Sponsor:  **DoverPhila**  
YOUR CREDIT UNION