

EVENT REGISTRATION FORM

Silver Lake Park, Silver Lake, WI Saturday, August 11th, 2018 8:30 p.m. Complete form; acknowledge waiver agreement, sign, and date

□ Individual	\$34.00	Mail to: Kenosha Running Company PO ***Make check payable to Kenosha http://www.xcthrillogy.com	Running Company Inc.
□ Couple*			(202)923-0300
	nd/wife, parent/minor child, or living in same household.	r For more information or to re	gister online visit:
Indicate distance(s):		http://www.xcthrillogy.com/night-crav Additional fees ma	
		Optional Donation to Kenosha Cou	nty Parks. \$
Full Name	9 :		· · · · · · · · · · · · · · · · · · ·
Address:			
City, State	e, Zip:		
		Email:	
	Age on Event Date	: Male or F	emale
Additional	Athlete Name:		Male or Female
Email:	nail:Age on Event Date:		
bound, do hereby which I may have thereof, all other sponsors for any	for myself, heirs, executors, and ass or which may hereafter occur to me cooperating agencies in this race, its	il Adventure and Relay(a Kenosha Running Compa signs, waive, release, and forever discharge any an against the Kenosha Running Company, Inc. or an or their respective officers, agents, representatives ained and suffered by me in connection with my ass	nd all rights and claims for damages by subsidiary or political division by successors, assigns, and
photograph, or vice exhibition, or any conjunction with t	deo in all forms, media and manners other lawful purposes. I waive the ri	sees, and legal representatives, the irrevocable rig, without restriction as to the changes or altercation ght to inspect or approve the photographs or electriat use is known to me or unknown, and I waive any dimages.	s, for advertising, trade, promotion, onic matter that may be used in
I have read	, understand, and agree	to this waiver:	
Signature:			
Additional S	Signature:		
):	