



INDIVIDUAL ENTRY FORM

One form per registrant



Today's Date: _____

Name: _____

Please print clearly

Male ☐ Female ☐ AGE _____ DOB _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____ - _____

Email Address: _____

Please print clearly

I am walking/running to support _____

	Choose one:	Pre- Registration	Post- Registration	Free T-shirt Before 3/16/15
<input type="checkbox"/>	5 Mile Road Race (Adult):	\$20	\$25	High Tech
<input type="checkbox"/>	5 mile Road Race (Runner Under 14):	\$12	\$15	High Tech
<input type="checkbox"/>	Walking Course:	\$12	\$15	Cotton
<input type="checkbox"/>	Child 6 or under:	FREE	FREE	XXXXXX

T-ShirtSize (Adult)

☐ XS/Youth XL ☐ Small ☐ Medium

☐ Large ☐ X-Lg ☐ XX-Lg

Missed the t-shirt deadline?

T-shirts may be available for purchase at the race finish, while supplies last.

T-shirts may be picked up during pre & post registration days. No substitutions for t-shirt sizes day of race.

Please read liability statement:

In consideration for this entry being accepted, I hereby for myself, my heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against Red's Shoe Barn, Inc, City of Dover, Rochester Runners, Dover Rec. Dept., Wentworth-Douglass Hospital, Dover Race Series, the non-profit agencies named, their agents, representatives, successors, for all injuries suffered by me at said event or while traveling to or returning there from.

Signature: _____

If under 18, signature of parent or guardian.

Reds Race contact person:

Brian Collins at bcollins@communitypartnersnh.org or redsrace@gmail.com



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