Schneeflocke	EVENT REGISTRATION FORM
TERALL DENTURI	KD Park Burlington, WI Saturday, December 29 th , 2018 4:00 p.m. Complete form; acknowledge waiver agreement, sign, and date.
 □ Individual \$34.00 □ Couple* \$57.00 	Mail to : Kenosha Running Company PO Box 126 Kenosha WI 53141 ***Make check payable to Kenosha Running Company Inc. http://www.xcthrillogy.com (262)925-0300
*couple is husband/wife, paren partners living in same	household. http://www.xcthrillogy.com/schneeflocke-trail-adventure.html
□ 3.0/6.0 mile CaniCro	oss \$29.00 Optional Donation to Kenosha County Parks. \$
Full Name:	
Address:	
City, State, Zip:	
Phone:	Email:
Age on	Event Date: Male or Female
Additional Athlete Nam	Event Date: Male or Female
Additional Athlete Nam Email:	Event Date: Male or Female e: Male or Female
Additional Athlete Nam Email: If CaniCross: Dog's Na In consideration for my entry in the hereby for myself, heirs, executors, may have or which may hereafter o other cooperating agencies in this re-	Event Date: Male or Female e: Male or FemaleAge on Event Date:
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