

Springville Apple Run

Saturday, October 21, 2017

8:00 am Kids Run

8:30 am 5K/10K/2M

Printable Registration Form Mail To:

Springville Apple Run

32011 Ave 176

Springville CA 93265

Full Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone: _____ Email Address: _____

Age on Race Day: _____ Date of Birth: _____ Gender: Male _____ Female _____

Event: 5K _____ 10K Trail Run _____ 2 Mile Walk _____

Half Mile Kids Run (5-12) _____

Shirt Size: Adult Extra Small _____ Adult Small _____ Adult Medium _____ Adult Large _____
Adult XL _____ XX (Add \$2.00) _____

Full Waiver and Release: I am aware this event is a cross-country race on a working cattle ranch and that participants will be running on uneven, sometimes dangerous terrain, and that in consideration for my entry being accepted, I hereby waive and release forever for myself and for my heirs, executors, administrators, any and all claims, causes of actions and suits I may accrue against the Apple Festival Committee, the Springville Community Club, Springville, County of Tulare, property owners on whose property the race is run, race director, volunteers and any sponsors of this race for any bodily injury, emotional injury, property damage or economic loss, including death suffered by me while traveling to and from or competing in the Springville Apple Festival 5K, 10K, 2 Mile Walk, or Half Mile Kids Run on October 21, 2017 whether from natural hazards, human-made hazards or any other defect or omission or act.

_____ I accept the full waiver and release. (Initial)

_____ I accept on behalf of the below-named minor and represent that I have the authority to sign this release. (Initial)

Signature: _____

Name of Minor: _____

Fees:	By October 07 th	By October 14 th
Adults	\$30	\$35
Youth (12 & Under)	\$20	\$25
Seniors (65 & Over)	\$20	\$25