

Registration Form  
10th Annual CVC Race  
Saturday, April 18th, 2009--11am  
IM Building--Penn State University

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

How/Where did you hear about the race? \_\_\_\_\_

Running in memory/celebration of: \_\_\_\_\_

Gender: M F Age on race day: \_\_\_\_\_

In consideration of being permitted to participate in the Coaches vs. Cancer 5K Run/Walk, I hereby for myself, my heir, and personal representatives assume any and all risks which might be associated with the event and I further waive, release and covenant not to sue the Pennsylvania State University, the American Cancer Society, its officers, members, sponsors, organizers, or representatives, or successors, and assigns for any injuries or damages of any kind whatsoever suffered in result of taking part in the event and related activities.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature of Parent or guardian if under 18 Date

Registration:

- Race day registration will begin at 9:30 a.m.
- Registration and packet pick-up will be announced later in April.
- Please go to [www.cvcpsu.com](http://www.cvcpsu.com) for updates.

Registration includes:

- Race entrance
- High quality t-shirts to the first 500 registered participants
- All-you-can-eat Spaghetti Dinner for all registered race participants
- An extensive selection of refreshments following the race.

Entry fees:

- \$15.00 for registration
- Checks are payable to "Coaches vs. Cancer"

Mail Registration or take it to:

Student Book Store  
c/o Coaches vs. Cancer 5K  
330 East College Ave.  
State College, PA 16801