

Trinity County Salmon Festival 5K Fun Run/Walk Registration Form

Last Name:	First Name
Mailing Address:	City, State
Zip:	Phone: ()
Age on Oct. 5th 2002:	
Family*?	If so, list member names:
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Where did you find out about the 2002 Salmon Run/Walk?

(which paper,ad, website etc)_

*Family size limited to five people.

Registration Fees:

P.O. Box 1450

Weaverville, CA 96093

Early Registration**: Individual:

Individual:\$10 without t-shirt\$22 run and t-shirtFamily:\$35 Plus \$12 per t-shirt

**note: t-shirts will only be available if preordered!

Event:	\bigcirc 5K Fun Run \bigcirc 5K	Fun Walk	○ 5K Fun Wheelchair
T-shirt:	○ Yes: Size: S M L Z	KL XXL	\bigcirc No

WAIVER: I have read, understood, and agree to the Run/Walk rules. I, intending to be legally bound, hereby for myself, my children, my heirs, my executors and my administrators, waive and release any and all claims that I may have against the persons and organizations affiliated with the Run/Walk, officials, the TRRC and the TCAC. I further attest that I am physically fit and have sufficiently trained for competition in this event. I accept full and sole responsibility for any injury I may incur while participating the the Run/Walk.

Signature:	_ Printed Name:
(Parent or Guardian must sign if participant is u	under 18)
Date:	Print Parent/Guardian name if applicable:
	County Arts Council (TCAC)
Send registration with payment to :	
Joel Silverman	
Trinity County RCD	

No Unless registering as a family, please submit one form per entrant No