The Salvation Army Home Run • Saturday, May 29, 2010 at 9:00 a.m. • Municipal Dock, 200 Ludington, Escanaba, MI

Mail-in Registration: One name per entry. **Must be postmarked on or before Sunday, May 16, 2010.** More info: (906) 399-3567

Please Print

Last Name | First Name | Initial

Address

City | State | Zip | Daytime Phone

E-mail | **U.P.R.R.C. Member?** **Yes** **No** Circle One

Sex | Age as of May 29, 2010 | Date of Birth | Volunteer? **Yes** **No** Circle One

Circle one event 1. **10k Run** 2. **5k Run** 3. **5k Walk** 4. **Kids' Run** (age 2-5) or (6-11) Team Name _____ Minimum 5 persons per team.

Circle one (10k or 5k**) division** **1.** 5 and Under **2.** 6-8 **3.** 9-11 **4.** 12-14 **5.** 15-17 **6.** 18-20 **7.** 21-24 **8.** 25-29 **9.** 30-34 **10.** 35-39 **11.** 40-44 **12.** 45-49 **13.** 50-54 **14.** 55-59 **15.** 60-64 **16.** 65-69 **17.** 70+ **Special Olympian? Yes No**

Circle one t-shirt size *Child* **M** *Adult* **XS S M L XL XXL** **T-shirts guaranteed only for registrations postmarked by 5/16/2010**

Race Participation Agreement/Waiver of Liability and Release (Participant must sign in order to be eligible to participate in Race): I, the undersigned, assume full and complete responsibility for any injury or accident which may occur during my participation in the event or while I am on the premises of the event. I, the undersigned, declare that myself, my heirs, executors, administrators and assigns waive and release any and all rights and claims for damages I may have against Home Run Innovations Inc., The Salvation Army, St. Vincent de Paul, Alliance Against Violence & Abuse, Lutheran Social Services, the City of Escanaba, the Race Director, and/or any sponsors of this event, their officers, directors, agents and any representative there of, their succesors and assigns for any and all injuries suffered by me of any nature. I understand that a foot race may be a hazardous activity and I certify that I am properly trained and that my physical ability to participate has been confirmed by a licensed medical doctor. I understand the the net proceeds of this event will be used to benefit the greater good of the community in the form of homeless shelter and homeless prevention services and that my participation, as a minor child or as an adult, willingly assists this community fundraising effort. I hereby grant permission

to Home Run Innovations Inc., The Salvation Army, St. Vincent de Paul, Lutheran Social Services, Alliance Against Violence & Abuse and any sponsor of this event to use my name, likeness and voice as well as photographs, video tape, motion pictures, recordings or any other record of this event in which I may appear for any liegitmate purpose including television broadsacting of this event, the re-use of any media of this broadcast and in advertising and promotion for such broadcast and use. **As an amateur middle school, high school or college athlete, I understad if I place in the top six places in my age group, I am limited under Interscholastic and Intercollegiate rules to receive only a trophy.**

SIGNATURE _____ **DATE** _____

(Parent or Guardian Signature **IF PARTICIPANT IS UNDER AGE 18**)

All entry forms must be signed!

Entry fees are Nonrefundable

Payment

Early Bird Registration: $17.00/single & $59.00/family fee by check or money order postmarked by **Apr. 20, 2010. (Do not send cash!)**

Regular Registration Fee: $25.00/single or $90.00/family 04/21/10 & thereafter. UPRRC Discount $2/Ind, $5/Fam

Kids' Run $4 ($10 with t-shirt)

Special Olympians Free (or $8.00 with t-shirt)

Enclosed _____

Donation _____

Payable to:

Home Run Innovations Inc
1509 Lake Shore Dr.
Escanaba, MI 49829