



Saturday, April 9th – Tolland High School
Register at www.spiritofspring5k.org

<p>Spirit of Spring 5K 12 PM Start Awards – top 3 finishers male & female in each age division Free T-Shirt for first 50 registrants before 3/22 Entry Fee - 18 Years and Under \$20.00 until 3/22 then \$25.00 - 19 Years and Up \$25.00 until 3/22 then \$30.00 - Families (same household) \$70.00 This is a certified 5K course, and a seeding race for The Manchester Road Race</p>	<p>Kim's 1 Mile Fun Run 11 AM Start 12 years and under – Free All Others - \$10.00 Donation or \$5.00 with 5K run</p> <p>This is a fun one mile running, walking or jogging event offering the opportunity for all entrants from toddlers to grandmothers to shake off the dust from their jogging shoes.</p>
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Mail-In Form

One entry form per runner. Please include non-refundable entry fee with signed application (checks payable to Lions Club of Tolland, one check per family) and mail all entries to Lions Club, attention Spirit of Spring 5k, P.O. Box 2020, Tolland, CT 06084

LAST NAME

FIRST NAME

STREET ADDRESS

TOWN/CITY

STATE

ZIP

EMAIL ADDRESS

AGE

MALE/FEMALE

Select Race(s): Please Check

Adult T-Shirts: (circle one) S M L XL

5k Road Race

19 up Received Before 3/22
19 up Received After 3/22

Individual

Family*
\$25 \$50*
\$30 \$50*

* Family Rate: 3 members or more

18 and under or with Student ID
18 and under After 3/22

\$20 N/A
\$25 N/A

Kim's Fun Walk/Run add \$5 add Families add \$20

Signature Required (Parent or guardian if minor)

Please enter me in the event as designated. In consideration of this entry being accepted, I hereby for myself, my heirs, executors, administrators, waive and release the Tolland Lions Club and the Tolland Knights of Columbus, Race Officials, the Town of Tolland, and the sponsors from any and all injuries suffered by me in/at this event. Any runner under 18 years of age must have written parental permission to compete in this race.

The events are jointly sponsored by the Lions Club of Tolland and the Tolland Knights of Columbus. All net proceeds are used for scholarships and organizational charitable contributions in the Tolland county area.

PLEASE NOTE WAIVER CONTINUED ON NEXT PAGE – PLEASE SIGN AND RETURN BOTH PAGES

Waiver:

I know that running or volunteering for a road race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat or low temperatures and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or roller blades, and animals are not allowed in the race and I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Tolland Lion's, Knights of Columbus, Town of Tolland, (add any other entities), all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Runner's Signature: _____

Print Runner's Name: _____

Date: _____

Parent's Signature if under 18 years: _____

Print Parent Name _____

Date: _____

PLEASE FILL OUT AND SIGN BOTH PAGES AND RETURN WITH PAYMENT TO LIONS CLUB,
ATTENTION "Spirit of Spring 5k", P.O. Box 2020, Tolland, CT 06084