

## Draper Days 2009 5K Entry Form

Please complete the following information and return to the address indicated below (please print or type):

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Shirt Size (circle one):    S        M        L        XL

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

USATF#: \_\_\_\_\_

Age: \_\_\_\_\_ Sex (circle one):    M        F

Clydesdale     Stroller

Release of Liability Statement:

I fully understand that I participate in the Draper Days 5K Run at my own risk. If in doubt as to my physical condition to engage in an event such as this, I will consult a competent physician and abide by his/her advice. In consideration of the privilege of participation, I intending to be legally bound, hereby, for myself, my heirs, executors, administrators, and assigns, waive and release any and all rights and claims I may have against the City of Draper, the Draper Days Committee, sponsors, or race directors and their agents for any and all injuries, ailments, or consequences suffered by me in the race.

Participant Signature:

Parent/Guarding signature if under 18:

Mail to:  
Draper Days 5K  
15069 Manilla Drive  
Draper, UT 84020