

Rock the Locks 5K Run

Saturday, June 19th, 2019 Start Time: 7:00 PM

Please return registration form to: Sault Ste. Marie Downtown Development Authority 511 Ashmun Street Suite #103 Sault Ste. Marie, MI 49783

For more information about Rock the Locks, please contact the Downtown Development Authority at: 906-635-6973, or email info@downtownsault.org

Race Fee:

Through May 31: \$30.00 June 1st – 15th: \$40.00 Race Day: \$45.00 (Race Day Registration: 4:00 – 6:00 PM ONLY)

Payment included with registration form? Yes No

| First name: | Last name: | | | | | | | |
|--|------------------|--|--|--|--|--|--|--|
| □ Male □ Female Age on Race Day: | _ Date of Birth: | | | | | | | |
| Email: | Phone: | | | | | | | |
| Street Address: | | | | | | | | |
| City: State: | Zip: | | | | | | | |
| Shirt Choice: Please note, shirt sizes can be guaranteed only if registration is received prior to June 1, 2019 | | | | | | | | |

| Mens: 🗆 S | □м | ΠL | □ XL | □ XXL | Ladies: 🗆 S | □м | ΠL | □ XL | □ XXL |
|-----------|----|----|------|-------|-------------|----|----|------|-------|
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| outh: | \Box S | ПΜ | ΠL |
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Waiver:

I have read this waiver and in consideration of your acceptance of this entry to the Rock the Locks 5K. I do hereby, for myself, my heirs, executors, and administrators, waive and release and discharge the hosts, sponsors or their respective agents, representatives, and employees from all claims, demands and rights of course of action, present and future, whether known or anticipated, resulting from or arising out of, either directly or indirectly, my participation in this community run event. I understand that I waive all rights and claims for any damages that I, my heirs or my assigns may have against the race sponsors or any and all organizations, private donors or lessors in any manner as a result of the above mentioned event. I attest that I am physically fit and sufficiently trained for the competition of this race and fully understand the risks involved in this event. I also hereby grant full permission to use my photographs, video tapes, recordings or other record of this event for any legitimate purpose.

 $\hfill\square$ By checking this box, I agree to the waiver above

Signature (signature of parent/guardian required if runner is under 18)

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Date (DD / MM / YYYY)