

Birthchoice presents:
25th Annual Run for Life
5K and 1 Mile Fun Run



August 17, 2019 - 8:00am 1 Mile Fun Run - 8:30am 5K
Wake Med Soccer Park, 201 Soccer Park Drive, Cary, NC

Name _____

Address _____

City _____ State _____ ZIP _____ Phone: _____

E-Mail _____

Gender M F Age Race Day ____ T-Shirt: YL AS AM AL AXL AXXL (please circle one)

Category: Competitive or Recreational (please circle one)

Entry fees are \$25 for the 5K and \$20 for the 1 Mile Fun Run.

After 7/30 the fees are \$30 and \$25, respectively.

Race day fees are \$35 and \$30, respectively.

Runners registering on or before 7/30 are guaranteed a shirt.

Enter me in the: 1M or 5K (please circle one)

Total Enclosed: \$ _____

Make checks payable and mail entries to:

Birthchoice/Run for Life

2304 Wesvill Ct Suite #340

Raleigh NC 27607

Waiver (MUST BE SIGNED)

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agreed to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with participating in the Run for Life, including, but not limited to, falls, contacts with other participants, the effects of the weather, including high heat and/or humidity, traffic and conditions of the road, all such risks being known and appreciated by me.

Having read this release and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act in my behalf or on behalf on my estate, waive and release Jim Young, Young and Associates, the Town of Cary, Birthchoice, and all sponsors of the race, any other persons assisting with the race, the officers, Board, Board members, agents, servants, employees, and their successors and assigns of each and every of the above from all claims or liabilities of any kind arising out of my participation in the race even though the liability may arise out of negligence or carelessness on the part of the persons referred to in this waiver.

I also agree to be contacted by the organizers or sponsors via e-mails as long as I am afforded the opportunity to opt out of future mailings. I also grant permission for the use of any photographs, motion pictures, recordings, or any other record of my participation in this event for any legitimate purpose. I understand that if the race is canceled because of circumstances beyond the control of the race committee and sponsors, including, but not limited to, unsafe weather conditions or governmental ban, my entry fee will not be refunded.

NO PETS PERMITTED ON COURSE

Signature: Participant or Guardian (if under 18) _____

Date _____

☐ 1st time participant ☐ returning participant

How did you find out about the event?

☐ www.runnc.com ☐ SEGP Series ☐ word of mouth ☐ via Birthchoice ☐ other _____