



# CHESHIRE LIONS CLUB

## 5K Race for Sight Application May 1, 2010

**Location:**

Cheshire Park  
Stony Hill Rd and Route 10  
Cheshire, CT

Walkers Welcomed  
Time:10 AM

Fill in all information

Preregistration \_\_\_\_\_ \$15.00

Registration- Day of the event \_\_\_\_\_ \$20.00

Register early to guarantee race day t-shirt!

Make checks payable to: **Cheshire Lions Foundation, Inc.**  
**P.O. Box 175**  
**Cheshire, CT 06410**

All entry fees are non-refundable.

\_\_\_\_\_  
Last Name First Name Sex

\_\_\_\_\_  
Mailing Address City State Zip Code

\_\_\_\_\_  
Phone Number Email Address

\_\_\_\_\_  
Age on Race Day Birth Date (mm-dd-yyyy)

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 agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all the risks associated with running in this event but not limited to fall, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and other conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Cheshire Lions Club and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission in this event to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. All forms must be signed. Incomplete or unsigned forms will not be accepted.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Signature of parent or guardian if entrant is under 18.

**P.O. Box 175 • Cheshire • Connecticut 06410**