

POCONO MOUNTAIN EAST CROSS COUNTRY THIRD ANNUAL

CARDINAL 5K

RUNNERS NAME:						
AGE:	GEND	ER:				
PHONE NUMBER:						
EMAIL ADDRESS:_						-
SHIRT SIZE: Please	e circle on	e				
	XS	S	M	L	XL	XXL
		Youth Sizes:		S	M	L

Thank you for supporting the Pocono Mountain East Cross Country team & Pocono Mountain Regional K-9 Unit!

RACE DATE: June 24th, 2017 @ 9:00am. Registration starts at 8:00 am

PLEASE REGISTER BEFORE MAY 30th, 2017 TO GET YOUR FREE T-SHIRT!!

Questions: Please contact Nicole Metzger at nmetzger@pmsd.org, or (570)839-7121 x. 80464



RELEASE OF LIABILITY (Adult)

Waiver: In consideration of the acceptance of this entry I waive all claims for myself and my heirs against the sponsors, cooperating and coordinating groups and any individuals associated with this event and will hold them harmless for any and all injuries which may result from my participation, whether such injuries are the result of negligence on my part or the part of any sponsor, cooperating or coordinating group. I hereby give my permission to the media to use my name and photograph in the newspaper, audio, or video of this event without limitation or obligation. I certify that I am physically fit for this event and understand the risks involved by participating in this event.

understand the risks involved by participating in this	
Signature	Date
	ABILITY WAIVER (Must be completed if under 18)
Participant name: (Print)	Birth Date:
Sex:	
Parent/Guardian Name: (Print)	Home Phone:
I, , grant permiss	sion for my child,, to
participate in	, , , , , , , , , , , , , , , , , , , ,
the 1 st Annual Cardinal 5K. As parent and/or legal of	juardian, I remain legally responsible for any personal
actions taken by the above named minor participan	

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