

BETHEL RURAL COMMUNITY ORGANIZATION

RACE APPLICATION FORM

Entry Form: (please print)

I wish to participate in (check one) Half _____ 5K _____

Last Name _____

First Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone _____ E-mail _____

Birth date (mm/dd/yy) ____/____/____ Age on (10/08/11) _____ Sex (circle one) M F

Emergency Contact Name and Phone _____

Entry Fee:

5K - \$25 Enclosed: \$ _____

Half - \$30 Enclosed: \$ _____

Must be postmarked by 9/30/2011

Liability Waiver and Release:

Upon acceptance of my entry, I, for myself, my heirs and assigns do hereby release Bethel Rural Community Organization, Inc., Bethel Schools, race sponsors, officials and volunteers from any and all liability arising from illness, injury or death that I may suffer as a result of my participation in either the Half Marathon or 5K Race. I attest that I am physically able and sufficiently trained for the race, which I am entering, and that I am aware that participation could result in physical injury. I grant permission for photos, motion pictures, recording or any other record of the events for any legitimate purpose. I agree to accept as final the decisions of the race officials.

Entrant Signature or Guardian (if under 18)

Date

Please print out this form

Make Checks payable to BRCO, and mail to: Bethel Rural Community Organization, Inc.
PO Box 1333, Waynesville, NC 28786

How did you hear about us? _____