



Julia's Run for Children

April 13, 2008

Pre-Registration Form

I want to register for: Main Run/Walk (4 miles), all ages
 Fun Run (0.7 miles), ages 12 and under

Last name:	First name:	
Address:		
City:	State:	Zip:
Phone:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Age (on 04/13/2008)	Email:	

General Waiver and Release: I understand that running a road race is a potentially hazardous activity. I will not enter and run or walk unless I am medically able and properly trained. I agree to abide by all decisions of the race officials as to my ability to safely complete the run. I assume all risks with participating in this event, including but not limited to: falls, contact with other participants, effects of the weather, traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts I, for myself and anyone entitled to act in my behalf, waive and release the Julia Rusinek Memorial Fund (including its members, volunteers, and sponsors), the City of New Haven, the New Haven Police Department, Yale University, LEAP, race officials including John Bysiewicz, JB Sports LLC, HI-TEK Racing, from all claims or liabilities arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, or any other record of this event for any legitimate purposes. I understand that dogs, bicycles, and in-line skates are not allowed on the course during the duration of the run.

Signature: _____ **Date:** _____

(if under 18 years of age)
Parent/Guardian signature: _____ **Date:** _____

Additional Runners:

Print name	Signature (please read Waiver and Release before signing)	Date	Age (on 4/13/08)	Sex (M/F)

	quantity	each	total
Main Run/Walk		\$16.00	\$
Fun Run		\$5.00	\$
Additional charitable contribution			\$
Total			\$

Mail this form and payment to:

Julia Rusinek Memorial Fund • 2 West Drive • Great Neck, NY 11021

www.juliarun.org • juliarun@gmail.com