

# MIMOSA ME CRAZY 5K - SEATTLE APRIL 14, 2019

Fill out completely – Please print clearly – One entrant per form/copies OK

|                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |          |  |  |  |  |  |  |       |  |  |  |  |  |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|----------|--|--|--|--|--|--|-------|--|--|--|--|--|
| FIRST NAME     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | LAST NAME |  |  |          |  |  |  |  |  |  |       |  |  |  |  |  |
| STREET ADDRESS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |          |  |  |  |  |  |  | PHONE |  |  |  |  |  |
| CITY           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | STATE     |  |  | ZIP CODE |  |  |  |  |  |  |       |  |  |  |  |  |
| E-MAIL         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |          |  |  |  |  |  |  |       |  |  |  |  |  |

PLEASE READ AND SIGN: I know that participating in a road race/walk is a potentially hazardous activity. I should not enter and run/ walk 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 event. I assume all risks associated with participating in this event including, but not limited to falls, contact with other participants, the effect of weather, including high humidity, traffic, and the 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 acceptance of my entry, I, for myself and anyone entitled to act on my behalf waive and release The End Result co., City of Seattle, Pro-Motion Events, Inc., USATF/PNTF, all sponsors, their representatives and successors from all claims or liability of any kind arising out of my participation even though said liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission for all of the foregoing to use my email address, any photographs, motion pictures, recording or any other record of this event for any legitimate purpose. This is to certify that my child has permission to compete in this event, is in good physical condition and that event officials may authorize necessary emergency treatment. I WILL BE CHARGED \$30 FOR UNRETURNED TIMING CHIPS. ENTRIES CANNOT BE ACCEPTED WITHOUT A VALID SIGNATURE. Includes all applicable taxes.

|           |      |      |
|-----------|------|------|
| Signature | Date | Date |
|-----------|------|------|

Pre-register by mail through April 8th Make checks payable to: Pro-Motion Events, Inc. P. O. Box 31789 Seattle, WA 98103

|  |     |      |  |            |                                      |       |  |  |  |
|--|-----|------|--|------------|--------------------------------------|-------|--|--|--|
| Age on 4/14/19   |     |      |  | Sex        | <b>M</b> <b>F</b>                    | BIB # |  |  |  |
| Date of Birth  |     |      |  | Adult Size | <b>S</b> <b>M</b> <b>L</b> <b>XL</b> |       |  |  |  |
| Month  | Day | Year |  |            |                                      |       |  |  |  |
| <input type="checkbox"/> Individual 5K Run or Walk<br><input type="checkbox"/> Mimosa Mile |     |      |  |            |                                      |       |  |  |  |

## Free Kids Dash & Eggstravaganza (\$12 additional for t-shirt)

### Non-Refundable Entry Fees

|   |          |
|---|----------|
| \$35 - Early Registration through March 6, 2019 | \$ _____ |
| \$40 - March 7th through April 3rd 2019         | \$ _____ |
| \$45 - April 4th through April 13th, 2019       | \$ _____ |
| \$50 - Day of Event, April 14th                 | \$ _____ |
| Total Amount Enclosed                           | \$ _____ |