

# Aspire 5K MASK-a-RACE

We supply the MASK ~ you run the RACE

## Aspire Christian Academy REGISTRATION FORM

October 29, 2016 ~ Two Rivers Park, Little Rock ~ 8:30 am



Early Registration  
\$25 for adult \$10 for child (age 2-12)  
(T-shirt guaranteed if registered through October 8<sup>th</sup>)

Day of Race Registration  
\$35 for adult & \$12 for child (age 2-12)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_M\_\_\_F Age: \_\_\_\_\_

Email address: \_\_\_\_\_

T-shirt Size: (adult)    S    M    L    XL    XXL  
(child)                S    M    L

### Release:

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in this race 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 risks associated with running and volunteering to work in club races including, but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic on the course, 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 Aspired 5K, Aspire Christian Academy, the City of Little Rock, the County of Pulaski, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the race and/or club activities even though liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

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

If participant is under the age of 18, a parent or guardian's signature is required: \_\_\_\_\_ Date: \_\_\_\_\_



Please mail entry form and payment to:  
**Aspire Christian Academy**  
12410 Cantrell Rd, Suite 200 Little Rock, AR 72223  
Call 501-224-1418 to charge by phone