## MIKE JENSEN MEMORIAL

## **FUN RUN & WALK**

## SATURDAY JUNE 7th 2014

5K RUN/WALK, YOU DECIDE

IT ALL BEGINS WITH REGISTRATION STARTING AT 8:30 RUN/WALK AT 10:00; LEWISTON KIWANIS PARK ON THE LEVY

| COST IS \$10 AND YOU DON'T NEED  | TO PREREGISTER  |  |   |
|--|---|--|---|
| Please mail registration form on or before   | June 1 <sup>st</sup> or just bring  | it to the event.   |   |
| ALL PROCEEDS BENEFIT THE WILLOW CEN  | TER FOR GRIEVING CHI  | ILDREN   |   |
| Reg  | gistration Form (Pl   | ease Print)  |   |
| Name:  | Age:  | Gender:  | MF  |
| Address:   | City:   | St:  | _ Zip:  |
| Please Read The Following Statem I know competing in a fun run is a potentially h and properly trained. I assume all risks associat other participants, the effects of weather, traff risks being known and appreciated by me. Ha acceptance of my entry, I, myself and anyone e organizers, their officers, agents, and assignees out of my participation in this event even thou persons named in this waiver. I also understa sign if the child is under 18 years of age. This stated waiver. | nazardous activity. I sho ted with competing in thi fic, interactions with non-aving read this waiver and entitled to act on my behas, the race director and vogh that liability may arise and that my entry fee is n | ould not enter and cor<br>is event, including but<br>-participants and the<br>d knowing these facts<br>alf, waive and release<br>olunteers from all cla<br>e out of the negligence<br>on-refundable and ne | t not limited to falls, contact with conditions of the course; all such and in consideration of the any and all sponsors and ims or liabilities of any kind arising e or carelessness on the part of the on-transferable. A parent must |
| Signature:   |   | Date:  |   |
| Parent/Guardian (if under 18 years of  | fage):  |  | Date:   |

Please mail registration to Dean Roy, Attention Mike Jensen Run. 1024  $16^{\rm th}$  Ave Suite "C" Lewiston ID 83501