

# 2011 SAM WARNER 5K Run

## October 8, 2011 -- 9:00 a.m.

Complete and forward the form below along with the \$12.00 registration fee to Salem Apple Butter Festival, Attn: Janet Warner - 5K Run, P.O. Box 293, Salem, WV 26426. Forms must be postmarked **before** October 7. Make checks payable to the Salem Apple Butter Festival. Fee on race day will be \$15.00. Walkers welcome.

Questions? Call Janet Warner (304) 782-3764.

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### SAM WARNER 5K REGISTRATION FORM

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age on 10/08/11 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Shirt Size: M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

Emergency Contact Name and Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Check if first-year participant [  ]

Check one: Runner [  ] Walker [  ]

I, the undersigned, in consideration of my entry in the Salem Apple Butter Festival Sam Warner 5K Run, do certify that I am physically fit and suitably trained to participate in said event. I agree to be bound by all rules of the race and decisions of the officials. I hereby forever release and discharge the organization and sponsors holding this event, its agents, representatives, successors, and assigns from any and all claims, courses of action, and suits which shall or may have arisen as a result of my participation in said event.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

(If applicant is under age 18)