

7th Annual

WAG-n-WALK & 5K Run



Saturday, October 24, 2015

Name: _____

Address: _____

City, State & Zip: _____

Phone: _____ e-mail: _____

Gender: Male Female Date of Birth ___/___/____ I am participating with a dog.

If applicable: I will Run Walk the 5K. Sign me up for PAWS' e-newsletter!

T-Shirt Size: **Child** ___S, ___M; **Adult**: ___S, ___M, ___L, ___XL, ___2XL

I would like to create a team.

I would like to join a team.

Team name: _____

	Early Bird <i>received by 9/30/15</i>	Regular <i>received 10/1/15 through day of</i>	Quantity	Total
Adult (13 & over)				
5K	\$25.00	\$30.00		
1-Mile Doggie Walk	\$25.00	\$30.00		
5K & 1-Mile Doggie Walk	\$45.00	\$50.00		
Child (12 & under)				
5K	\$10.00	\$15.00		
1-Mile Doggie Walk	\$10.00	\$15.00		
5K & 1-Mile Doggie Walk	\$15.00	\$25.00		
Total =				

Complete the back of this form for each additional person you are registering at this time (print additional forms if necessary). We will send each person an e-mail with information for them to complete their registration.

WAIVER: Owners are responsible for cleaning up after & maintaining control of their pets. Owners must vouch for the fact that their dog is up-to-date on all vaccinations and has a current, valid state dog license. All dogs must be leashed at all times during this event. Aggressive dogs & dogs in heat should not participate. Waiver of liability: In consideration of accepting this entry, I, the intending to be legally bound, hereby, for myself, my family, my heirs, executors, & administrators, forever waive, release & discharge PAWS, Fuel3Sports, Nova Timing Systems, Delcastle Recreation Park, and other sponsors of this race and/or their representatives from any and all liability arising from illness, personal injury, or property damage which I or my pet(s) suffer and/or cause as a result of participation in this event. I attest that my own physical condition and that of my pet(s) are adequate to participate in this event. I understand that there may be traffic on the course. Further, I grant full permission to PAWS and/or agents hereby authorized by them, to use any photo-graphs, videotapes, motion pictures, recordings or any other legitimate media for any purpose at any time. I have read the waiver carefully & understand it.

By signing here, I agree to the waiver above. _____

Signature

Date

Please send this registration form and your check or money order to:
PAWS for People Wag-n-Walk Registration, P.O. Box 9955, Newark, DE 19714

Participant 2: _____

Address: _____

City, State & Zip: _____

Phone: _____ e-mail: _____

Team name:

Gender: Male Female Date of Birth ___/___/____ I am participating with a dog.

If applicable: I will Run Walk the 5K. Sign me up for PAWS' e-newsletter!

T-Shirt Size: **Child** ___S, ___M; **Adult:** ___S, ___M, ___L, ___XL, ___2XL

Participant 3: _____

Address: _____

City, State & Zip: _____

Phone: _____ e-mail: _____

Team name:

Gender: Male Female Date of Birth ___/___/____ I am participating with a dog.

If applicable: I will Run Walk the 5K. Sign me up for PAWS' e-newsletter!

T-Shirt Size: **Child** ___S, ___M; **Adult:** ___S, ___M, ___L, ___XL, ___2XL

Participant 4: _____

Address: _____

City, State & Zip: _____

Phone: _____ e-mail: _____

Team name:

Gender: Male Female Date of Birth ___/___/____ I am participating with a dog.

If applicable: I will Run Walk the 5K. Sign me up for PAWS' e-newsletter!

T-Shirt Size: **Child** ___S, ___M; **Adult:** ___S, ___M, ___L, ___XL, ___2XL