

Sponsored

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EXonMobil

5k Run/Walk, 1 Mile (under 9) & Special Needs 1/2 Mile BREC's Greenwood Park SEPTEMBER 19, 2015 AT 8 AM

REGISTRATION: 7AM at the Greenwood Park Waterfront

MAIL ENTRY FORM & PAYMENT TO:
Baker Buffalo Festival 5K
City of Baker
3325 Groom Road
Baker, LA 70714

\$6 for Students 19 and Under / \$12 for Adults

ENTRY FORM

INDICATE T-SHIRT SIZE: S M L XL XXL: CHILD YOUTH ADULT NO SHIRT

NAME:					
CITY/STA	TE/ZIP: .				
CIRCLE:	MALE	FEMALE	Age:	Birth Date:	
Phone Nu	mber: A	rea Code & I	Number:		
volunteering to not enter and/oby any decision I assume all ri Buffaloes even high heat and/oby me. Having I, for myself a City of Baker of my participa out of neglige foregoing to u	o work in the or run in the on of race/evisks associant including or humidity, gread this wand for anyound all sporation in the lence or care use any pho	e Baker Buffalo Fe activities unless vent officials relatited with running abut not limited to the conditions of vaiver and knowing ne entitled to act of asors, their representations on the pelessness on the period of the conditions of the condit	estival Running of to I am medically ablaive to my ability to and/or volunteering to falls, contact with the road and traffices these facts and in on my behalf waive entatives and succestival Running of the part of the persons pictures, recording	the Check for Race Entry. I know the Buffaloes is a potentially hazard e and properly prepared and/or trait safely compete or assist in this orgage to work in the Baker Buffalo Festh other participants, the effects of the on the coarse, all such risks being known consideration of your acceptance of e and release the Baker Buffalo Festsors from all claims or liabilities of the Buffaloes activities, even though the named in this waiver. I grant perform any other record of my participation.	lous activity. I should ined. I agree to abid anization's activities stival Running of the weather, including nown and appreciate f my entry for racing stival Committee, the f any kind arising out the liability may arise mission to all of the
Signature: _				Date:	
*Parents'/G	uardians'	Signatures:		Date:	
		* (required i	if participant is	s under 17 years old)	

For additional Information:

please call: (225) 778-0300