SUNDAY
June 29, 2014
8 a.m.

I'm trying

5K Road Race

Second annual in memory of
Daniel Casey Shannon
Friend, Mother, Champion

Who are you trying for?

Write individual's name here: _____

To benefit Cancer Research & the Hampton Recreation Department

Sunday, June 29, 2014 8am **Winnacunnet High School**

Step 1: Neatly fill out all information

Last Name:_____ First Name:_____

Address:_____ City/State_____

Email:_____ Sex: M/F_____ Age on 6/23/2013_____

Phone Number:_____

Running Club/Team Name_____

Circle T-Shirt Size: **S M L XL** (first 100 pre-registered 5K runners receive a free T-shirt)

Choose your category: _____5K Road Race _____5K Recreational Walker _____5K age 12 and under

Step 2: Review and sign waiver

I know that participating in the I'M TRYING 5K ROAD RACE is potentially hazardous. I should not enter and participate 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 distance. I assume all risks associated with participating in this event, including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my application, I for myself and anyone entitled to act on my behalf, waive and release the Hampton Recreation and Parks Department, the Town of Hampton, the Hampton Police, the State of NH, USATF, all sponsors, race officials and volunteers, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event though that all liability may arise out of negligence or carelessness on the part of the person named in this waiver. I grant permission to all foregoing to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose. NOTE: Athletes who participate in this competition will be subject to formal drug testing in accordance with USATF rules and IAAF Rule 144. Athletes found positive for banned substances, or who refuse to be tested, will be disqualified from this event and will lose eligibility for future competitions. Some prescription and over-the counter medications contain banned substances. Information regarding drugs and drug testing may be obtained by calling the USAOC Hot Line at 800-233-0393.

Signature/Guardian (if under age 18)_____

Step 3: Make check payable to: Hampton Parks & Recreation Department
100 Winnacunnet Road, Hampton, NH 03842. *All entry fees are non-refundable.*

5K ROAD RACE $25.00 **Age 12 & UNDER, $15.00** **RACE DAY ENTRY $30 IF AVAILABLE**