



**18th Annual
5K Run and Fitness Walk
Saturday,
May 23, 2020
9:00 a.m.**

**Irondequoit United Church of Christ
644 Titus Avenue
Irondequoit, NY**

OFFICIAL 5K RUN & WALK ENTRY FORM

Enter all information below, including shirt size, and sign waiver which is required to participate.

Name _____ Age _____ Male [] Female []

Address _____

City/State/ZIP _____

E-mail _____

I am registering for the: 5K Run [] 5K Fitness Walk []

Shirt Size: S [] M [] L [] XL [] 2XL []

Pre-registration Fee (postmarked by May 15, 2020)—\$25.00

Post and race-day Registration Fee—\$30.00

[] I would like to make an additional tax-deductible donation to Sunset House in the amount of \$ _____

Mail Entry To: Sunset House 5K, 3746 St. Paul Blvd., Rochester, N.Y. 14617

Make checks payable to: Sunset House 5K

E-mail for more information: patti22@frontiernet.net.

Visit our website at www.sunsethouse.info.

RACE WAIVER - PLEASE READ AND SIGN TO PARTICIPATE

I know that running a road race is a potentially hazardous activity. I should not 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 event. I assume all risks associated with running this event, including, but not limited to, falls, contact with other participants, the effects of weather, traffic, and conditions of the road, all such risks being known and understood by me, having read this waiver and knowing these facts and in consideration of accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Sunset House Hospice, the Irondequoit United Church of Christ, Town of Irondequoit, County of Monroe, USATF, its subsidiaries & their respective employees, directors, assigns & USATF Certified Officials, USATF Niagara, sponsors and agencies and municipalities, their representatives, and successors for all claims or liability of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature of participant: _____

Signature of parent/guardian of participant under 18 years of age: _____

USATF Member # (if Applicable): _____