



Application for Registration

- \$15Pre – registration (must be received by Friday May 23, 2008)
- \$20Race Day

Check one: Run Walk Gender _____ Age on Race Day ____ T-shirt size _____

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _(____)_____ Email _____

Method of payment: Check Visa MasterCard Amount \$ _____

Card holder's name _____

Card holder's Address _____

Card holder's City _____ St _____ Zip _____

Card number _____ Exp. Date _____ CID# _____

Card holder's signature _____

Applicant Waiver

I certify that I have sufficiently trained for this event and that my physician has certified that I am physically fit to compete. In consideration of my application being accepted, I release and hold harmless the Buzzards Bay Village Association, Inc. all of its agents and all of its sponsors from any and all claims of damages and waive all rights to any claims of damages that I might have as a result of or in any way connected to my participation in the Around the Bay 5K. This release includes any claims based on any negligent act or negligent omission on the part of the Buzzards Bay Village Association, Inc. and its agents. I give my express permission for any likeness of me or any recording of me taken by any media in conjunction with the race to be used in any manner deemed suitable by the Buzzards Bay Village Association, Inc.

Race Applicant's Signature

Date

Phone 508-759-8002

Fax 508-759-8003

Email: edean@sovereignbank.com