



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Alexander County Family YMCA

Color My Run

1st Annual Color Fun Run

Registration Form

Saturday, May 7, 2016

Race Starts at 8:00am

Make checks payable to/mail to:
Alexander County Family YMCA
260 Black Oak Ridge Road, Taylorsville, NC 28681
Visit www.acfamilyymca.org for more information or
contact Christy Harrington at
828 632 9699 or c.harrington@ymcanwnc.org

Registration Fees:

Ages 12 & under	Before April 16	\$20	(Guaranteed shirt)
Ages 13 & older	Before April 16	\$25	(Guaranteed shirt)
Ages 12 & under	April 16 and after	\$25	(No shirt guarantee)
Ages 13 & older	April 16 and after	\$30	(No shirt guarantee)

Same Day Registration will be from 7:00am – 7:45am at Matheson Park

Participant Gender: **Male** or **Female** Adult Shirt Size: (Please circle) **S** **M** **L** **XL** **XXL**

Youth Shirt Size (Please circle): **(S) 6-8** **(M) 10-12** **(L) 14-16**

Name: _____ Age: _____ DOB: _____

Street Address: _____ City: _____ State: _____

Zip Code: _____ Phone: _____ Email: _____

Waiver: I understand that participating in a road race is a potentially hazardous activity and I should not enter unless I am medically stable and properly trained. I assume all risks associated with running or walking in this event including, but not limited to, falls, contact with other participants, the effects of the weather and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing the facts and in consideration of your accepting my entry form, I, for myself, and anyone else acting on my behalf waive and release and indemnify the organizers of the race, Alexander County Apple Blossom Festival volunteers, Alexander County YMCA, Alexander County, Town of Taylorsville, all sponsors, their representatives and assignors from all claims or liabilities of any kind arising out of my participation in this event, even though negligence or carelessness may arise on the part of the persons named in this waiver. I also give my permission for the free use of my name and picture in any written account, broadcast or telecast of this event for any legitimate purpose. By signing the following, I accept the above waiver.

Participant Signature: _____	Date: _____
Guardian sign if participant under 18 _____	Date: _____