



Lyme/Old Lyme Community 5K Fitness Run & 1 Mile Fun Run

(NOTE: This event will not be timed. Come out and run for fun and for a great cause)

Date: Saturday, July 31, 2010

Start Time: 8:30 a.m.

Race Day Registration Time: 6:45 to 8:15 a.m.

Registration Location: Lymes' Youth Service Bureau, 59 Lyme Street, Old Lyme

Suggested Donation: \$20 – 5K Fitness Run \$10 – 1Mile Fun Run

T-shirts included in registration. This event is USATF Sanctioned

Post Race Celebration with Refreshments & Entertainment !

Pre-register by completing this registration form with a check payable to: Caroline's Miracle Foundation.

Bring to **LYSB** (59 Lyme Street) or to **Webster Bank**, 7 Halls Road, Old Lyme, CT 06371

For additional information visit www.LYSB.org or call Taylor Bourne and Hanna DeBruyn at 860-434-1725.

All Proceeds to benefit Caroline's Miracle Foundation

I, _____ the undersigned by registering in the Lyme/Old Lyme Community 5K Fitness Run and 1 mile Fun Run to benefit Caroline's Miracle Foundation, understand the nature and risks associated with participation in this activity. I am aware that participation is at one's own risk. I acknowledge that the activity, equipment and facilities may pose significant risk of personal injury. I am aware that each participant is responsible for his or her own safety. I hereby grant for myself, my heirs, executors, administrators, waiver and release of any and all claims of damage we ever had, now have or will have, against Caroline's Miracle Foundation, USATF and any person or entity associated with the organization or administration of or otherwise in connection with the Lyme/Old Lyme Community 5K Fitness Run and 1 mile Fun Run, including but not limited to personal injury and/ or property damage suffered by myself, while participating in this activity. I understand that Caroline's Miracle Foundation is not responsible for medical, hospital, emergency room or transportation expenses for any incidental illness or injury to the above named participant. I certify that the information contained on this form is accurate and complete.

First Name: _____ Last Name: _____ Age _____

Event (Circle one) 5K Fitness Run 1 Mile Fun Run

Address: _____ Town _____ State _____ Zip _____ Phone: _____

Email: _____ T Shirt Size: Youth S M L Adult S M L XL XXL

Signature: _____ Date: _____

(Parent or guardian if under 18)

5K Course

1 Mile Course

