

# FCVA Virtual 5K Run/2 Mile Walk 

# Wednesday, October 14 through Wednesday, October 21 <br> Convalregionalhighschool.bigteams.com/main/boosters 

Please print legibly and complete the entire entry form. More than one entry may be mailed together with the appropriate fees. Please make all checks payable to FCVA. Bibs will be sent via email.

Adults: \$10
Kids (3 to 18): \$5
Please mark below which athlete/team you would like your fee to support. If you don't want to run/walk, you can make a donation in support of an athlete/team.

First \& Last Name: $\qquad$
Adult / Child /Donation (circle one) ConVal District Student Y / N (circle one)
Athlete and/or Team Sponsoring: $\qquad$
Address: $\qquad$

Town: $\qquad$ State: $\qquad$ ZipCode: $\qquad$
Phone: $\qquad$ ) ___ - $\qquad$ Email: $\qquad$ @ $\qquad$


#### Abstract

Race Waiver: I, individually, (and/or as parent, and/or guardian of the named minor) for and in consideration of acceptance of this entry in the aforementioned event, do hereby release, remise, waive, and forever discharge FCVA, together with all their officers, from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of, or relating to any injury, illness, loss or damage, including death, relating to participation in the aforesaid event. I further state that I am in proper physical condition to participate in this event. I further grant permission to this race and the organization conducting the race and/or agents authorized by them to use any photographs, videos, and any other record of this event for promotional purposes. I also agree that all entry fees are non-refundable and that his entry is non-transferable. Thank you for participating! Signature (Parent/Guardian if Participant is under 18):


Date $\qquad$

Mail Completed Form To: FCVA c/o Beth Crooker 18 Colburn Road Temple, NH 03084

Prizes:
3 Runners Chosen at Random: \$50 (2) \$25 (1)
3 ConVal District Student Runners: \$50 (each)
Best Costume (costumes optional): \$25

