RACE APPLICATION CHAMBER CHALLENGE 5K RUN/WALK

NAME:	_ EMAIL:
ADDRESS:	 6
CITY:	STATE: ZIP:
PHONE: SEX: _	D.O.B.: AGE (DAY OF RACE):
T-SHIRT SIZE: XSSMLXLXXL PAYMENT: CASH CHECK # TO PAY BY CREDIT CARD, REGISTER ONLINE AT RACESM COST: \$25 (PRE-REGISTERED PRIOR TO 4/8/2015)	
\$30 (DAY OF RACE)	HALIFAX HEALTH
CORPORATE TEAM NAME:	Live your life well.
DISCHARGE THE SOUTHEAST VOLUSIA CHAMBER CF COMMERCE, RACE SFROM ANY AND ALL LIABILITY INCLUDING LIABILITY FOR THEIR OWN NEW PARTICIPATION, WHETHER DUE TO THE ACTS OF THIRD PERSONS OR CTRAINED TO PARTICIPATE IN THE CHAMBER CHALLENGE 5K ON APRIL 9	ARTICIPATE IN THE CHAMBER CHALLENGE 5K, I DO HEREBY RELEASE AND SPONSORS, THE CITY OF NEW SMYRNA BEACH, SERVANTS, OR EMPLOYEES GLIGENCE, FOR DAMAGES OR INJURIES THAT I MIGHT RECEIVE DURING MY OTHERWISE. I ATTEST AND VERIFY THAT I AM PHYSICALLY FIT AND WELL 9, 2015. I ATTEST AND VERIFY THAT I AM INFORMED OF THE DANGERS OF IN TO OTHER RACE DIRECTORS TO KEEP ME INFORMED OF OTHER RUNNING
Signatu	re of Applicant/RunnerDate
Signatu	re of Parent/Guardian if Entrant under 18 years of age.
	Te of Fareth/Guardian if Entrant under 10 years of age.
	IA ST AND RIVERSIDE DR IN NEW SMYRNA BEACH P 3 IN EACH AGE DIVISION, TOP MALE & FEMALE MASTERS TO TOP CORPORATE TEAM MMERCE PARKING LOT, REFRESHMENTS TO ALL RUNNERS Y OF RACE @ \$30. SPECIAL PRICING FOR GROUPS OF 20 OR MORE.
MAKE CHECKS PAYABLE TO: S.E. VOLUSIA CHAMBER OF COMMER	RCE. MAIL TO: 115 CANAL STREET, NEW SMYRNA BEACH, FL 32168
FOR MORE INFORMATION VISIT OUR WEBSITE AT WWW REGISTER ONLINE AT: RACESMITH.COM	SEVCHAMBER.COM OR CALL 386-428-2449
ald Sponsors:	Chamber
A CITED A CO	R JEEP DODGE RAM Challes