

ST. PATRICK'S DAY 5K RUN



WHEN: SATURDAY, MARCH 12, 2011 AT
9:00 A.M.

WHERE: LONGLEAF TRACE GATE-
WAY AT USM

REGISTRATION: 8:00 A.M. (IF NOT
PRE-REGISTERED)

COST: \$10 (REGISTER BEFORE 3/7),
\$15 (AFTER 3/7)

Name: _____ Age: _____ Sex: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone Number: _____

E-mail address: _____

T-shirt size* (circle one): S M L XL XXL

Cash: _____ Check: _____ Check #: _____

In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury/accident which may occur during the event. I am also aware of and assume all risks associated with participating in this event, including falls, contact with other participants, effect of weather, traffic, and conditions of the course. I hereby waive all persons associated with the event, for all my liabilities, claims, actions, or damages that I may have against them in any way connected with my participation in this event. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise. I understand that the entry fee is non-refundable. I hereby grant full permission to any and all of the above parties to use any photographs or any other record of this event.

Signature: _____ Date: ____/____/____

*Adult sizes only. If writing a check, please make payable to American Heart Association (Tax-deductible contribution). Payment must be received by 3/7 to be guaranteed a shirt. Extra shirts will be given on first come, first serve basis for those paying after 3/7. Mail this registration form and fee to:

St. Patrick's Day 5K Run
Attn: Kent McCarty
50 Tidewater Road
Hattiesburg, MS 39402

For any additional questions, call Kent McCarty at
601-543-9318 or send an e-mail to kentmccarty@gmail.com.

PROCEEDS GIVEN TO **AMERICAN HEART ASSOCIATION**