The Coaster Run

March 25, 2012

ENTRY FORM

One entry per form. This form may be photocopied.
Please print legibly and USE BLUE OR BLACK INK ONLY.

Office use only

FIRST NAME | LAST NAME

AGE ON RACE DAY | DATE OF BIRTH ___/___/___ | SEX: ☐ M ☐ F | DAY PHONE ___–___–___

STREET ADDRESS

CITY | STATE | ZIP

EMAIL ADDRESS

☐ I am participating on a team: SCHOOL/CLUB/TEAM NAME/CODE: _____

I am registering for: *(Check one only)* ☐ 10k ☐ 5k ☐ 1k Kid's Run/Walk

Age Group: ☐ 13 & under ☐ 14-18 ☐ 19-24 ☐ 25-29 ☐ 30-34 ☐ 35-39 ☐ 40-44 ☐ 45-49 ☐ 50-54 ☐ 55-59 ☐ 60-64 ☐ 65-69 ☐ 70-74 ☐ 75+

T-Shirt Size: ☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL ☐ CHILD'S MED

Entry Fees *(Make checks payable to Renegade Racing)*	*Until 10/1*	*Until 1/16*	*Until 3/5*	*After 3/5*	*Race Day*	
5k Run/Walk	$25	$27	$32	$37	$40	$_____
10k Run	$32	$35	$40	$45	$48	$_____
Kid's 1k Run/Walk	$15	$15	$18	$22	$25	$_____
TOTAL AMOUNT ENCLOSED						$_____

☐ Visa ☐ MC ☐ Am Ex Billing Zip Code

Credit Card # _____ Exp. Date _____ Signature _____

WAIVER: I, the undersigned, understand that there are risks associated with strenuous physical exertion and with this event, including but not limited to those caused by terrain, weather conditions, condition of the participant, vehicles, other participants and failure to adequately fuel or hydrate the body. In consideration of your accepting this entry to participate in The Coaster Run from now on referred to as the "Event", I hereby assume ALL RISKS associated with this event and I hereby waive, release and discharge Make-U-Fit Productions LLC, Renegade Racing, race officials, volunteers, the City of Buena Park, all sponsors, their representatives and successors from any and all claims for damages for death, personal injury or property damage or actions of any kind which may hereafter accrue to me or any other person as a result of my participation in this event and furthermore agree not to sue any person or company related to this event. Further, I hereby grant full permission to any and all foregoing to use any photographs, video tapes, motion pictures, recordings or any other record of this "Event" for any legitimate purpose such as but not limited to advertising, race brochures, posters and other promotional material. I also understand that I will receive information about the race via e-mail from Renegade Racing and Make-U-Fit Productions LLC.

Signature _____ Date _____

MAIL TO: Renegade Racing, 17835 Sky Park Circle, Suite F, Irvine, CA 92614
FAX TO: (949) 975-1814
ENTRY FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.