One Entry Per-Applicant

Last _____First_____

Address_____

City _____Phone (____)_____

Email_____

Sex ☐ M ☐ F Age (on race day)_____

Birthday_____/_____/_____

I will participate in the following event:

☐ 1 Mile Fun Trot/Walk ☐ 5K Run ☐ 5K Walk

Waiver - Please Read Carefully and Sign

In consideration of this entry being accepted I hereby for myself, heirs, executors, and administrators, waive and release any claims I may have against The Lompoc SDA Church and the City of Lompoc, as well as any and all Parties, Groups, Organizations, volunteers, Sponsors, and (or) any Representatives involved in this event for any and all injuries suffered by me in these events. I certify that I am in physical condition for this event. I am aware that any pictures involving my likeness may be used To the news media support of the program.

_____

Signature Date

_____

Signature of parent or guardian if under 18 years Date

Payments by cash, check or money order• Make payable to Lompoc SDA Church
Phone Number (805) 736-1905 (Leave message for Chris)

Mail Entry & Waiver to: **Lompoc SDA Church.• 205 West Chestnut Avenue • Lompoc CA 93436**