



## 2017 Kid Registration Form

Kids 10 and under are free with paying adult

Team registrants, please use team form

Runner \_\_\_\_\_  
Last Name, First Name

Gender  Female  Male  Transgender

Birthdate \_\_\_\_\_ Under 10?  Yes  No  
(If no, please register and pay as individual)

Email Address \_\_\_\_\_ Day Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Would you like your run to be timed?  Yes  No

Waiver (must be signed to participate)

In consideration of acceptance of this entry, I hereby for myself, my heirs, executor and administrators, assume all risk of injury, harm or damage to myself or others arising from my participation in this event, and agree to hold harmless any sponsors, volunteers, Community Youth Services, City of Olympia, Port of Olympia, Guerilla Running and any person or organization associated with this event, against any liability, actions, claims and damages of any kind whatsoever. My signature verifies that I am physically fit and have sufficiently trained for the event and have full knowledge to all the foregoing to use any photographs. Motion pictures, recording or any other record of this event for any legitimate purpose. If I am under 18 years of age, my parent/guardian must co-sign.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

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\*\*\*\*NO REFUNDS ON RACE ENTRIES\*\*\*\*

Completed forms can be mailed to CYS at 711 State Ave NE Olympia, WA 98506,  
dropped off at CYS, or emailed to [lpolanco@communityyouthservices.org](mailto:lpolanco@communityyouthservices.org)