

# Day of the Dead 5K Registration Form

Washington Park, Denver, CO

Print this form, fill it out, and send it to Colorado Runner Events to register.

## Entry Fees:

**Day of the Dead 5K**  
\$25 through June 30  
\$28 starting July 1  
\$30 starting October 1

\*\* \$5 less for ages 17 and under. Add \$5 if registering on race day. \*\*

**Make checks payable to Colorado Runner Events LLC.** Mail the form and check to:

Colorado Runner Events LLC  
PO Box 1511  
Parker, CO 80134

## Please print!

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Sex: \_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Race Day: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Please provide your email address to receive important pre- and post-race instructions as well as confirmation of registration.

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Shirt Size: Youth - S M L Adult - S M L XL

Cash  Check: # \_\_\_\_\_

## LIABILITY WAIVER MUST BE SIGNED BEFORE MAILING OR FAXING:

I know that running a road race is a potentially hazardous activity and that I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants and wildlife, the effects of the weather (including high heat or extreme cold, snow, ice, wind and/or humidity), traffic and the conditions of the road and trail, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Colorado Runner Events LLC, Colorado Runner LLC, Denver Parks and Recreation, City of Denver, RRCA, USATF, and all other sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event or carelessness on the part of the persons named in this waiver. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for legitimate purposes.

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

(parent or guardian if under 18):