

## City of Baker Spring 5K Run/Walk APRIL 26, 2014 AT 8 AM

REGISTRATION: 7AM at the Baker Chamber of Commerce 3439 Groom Road, Baker, Louisiana

MAIL ENTRY FORM & PAYMENT TO: Baker Charitable Foundation P.O. Box 449 Baker, LA 70704

\$5 for Students/\$10 for Adults

## **ENTRY FORM**

| INDICATE T-  | SHIRT SIZE:  | SMLX  | (L XXL:   | CHILD   | YOUTH  | ADULT   | NO SHIRT  |  |
|--|--|---|---|---|--|---|---|--|
| NAME:  |  |   |   |   |  |   |   |  |
| MAILING ADD  | DRESS:   |   |   |   |  |   |   |  |
| CITY/STATE/  | ZIP:   |   |   |   |  |   |   |  |
| CIRCLE ONE:  | MALE FEMALE  |   |   |   |  |   |   |  |
| Age Group:   | Under 19   | 20-29   | 30-39   | 40-49   | 50-59  | 60-69   | Over 70   |  |
| Phone Number: Area Code & Number:  |  |   |   |   |  |   |   |  |
| Participation Legal is a potentially haza prepared and/or tra or assist in this orga-but not limited to-the conditions of the waiver and knowing anyone entitled to successors from all activities, even thore waiver. I grant permof my participation | ardous activity. I nined. I agree to a anization's activity falls, contact with read and traffing these facts and act on my behalf claims or liability remission to all of the street of the street. | should not enable by any dities. I assume a thother partice on the coarsed in consideral waive and thies of any kind may arise out the foregoing to | ter and/or ru<br>ecision of ra<br>all risks asso-<br>ipants, the e-<br>e, all such ri-<br>tion of your<br>release the O<br>d arising out<br>of negligence<br>o use any ph | in in the active<br>acceptent officiated with reffects of the visks being known acceptance.<br>City of Bake of my participe or careless otographs, my | vities unless I licials relative unning and/o weather, incluown and approof my entry for and all sport and all sport pation in the pation picture. | am medically to my ability r walking in the ding high head eciated by me for racing, I, asors, their recity of Baker art of the person. | vable and properly to safely compete the event including at and/or humidity e. Having read thi for myself and fo epresentatives and Spring Run/Wall sons named in thi |  |
| Signature:   |  |   |   |   | Date:  |   |   |  |
| *Parent's/Guardian's Signature:  |  |   |   |   | Date:  |   |   |  |
|  | * (re  | quired if pa  | ırticipant  | is under 1  | 7 years old  | )   |   |  |
| Sponsored in part by:  Bernard's Restaurant  Subway of Ba  |  |   |   |   |  |   | ncil Member<br>nks-Daniel   |  |

For additional Information: please call: (225) 778-0300