

Ajvar 5K Run/Walk

Sunday, September 25, 2016

Baypoint Beach – Stony Creek Metropark

4300 Main Park Road, Shelby Township, MI 48316

Begins at 10:00 AM

Registration before 09/25/16: \$25

Race day registration: \$35

Free registration for kids under 10 y/o when parents sign up too

Complete this form and waiver or register online at www.Ajvar5K.com.

(Checks made payable to United Macedonian Americans of Detroit)



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Registration Form:

Name: _____ DOB: _____ Age: _____ Gender: _____

Address: _____

Phone: _____ Email: _____

Select all that apply:

- Registering as a family
 ___ # form(s) included
- I'm a parent or guardian to
 a participant under 10 years old

T-Shirt Size: S___ M___ L___ XL___

Mail registration form and payment by September 16, 2016 to:

Detroit Ajvar 5K Committee
C/O United Macedonian Americans of Detroit
29688 Telegraph Road, Suite 200
Southfield, MI 48034

Waiver (must be signed)

I understand that walking and running in races are potentially hazardous activities. I should not enter and run or walk in the United Macedonian Diaspora/United Macedonian Americans of Detroit/Macedonian-American Student Association Ajvar 5K Run/Walk (the "Event") unless I am medically able and properly trained. I agree to abide by any decision of an Event official relative to my ability to safely complete the Event. I assume every risk associated with participating in the Event including, but not limited to, falls, contact with Event participants or volunteers or with vehicles, the effects of the weather, and course conditions, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, do waive and release the Ajvar 5K Run/Walk, Event timers, sponsors and organizers, and their representatives, agents, affiliates, employees and successors from all claims and/or liabilities of any kind arising out of my participation in the Event even though such liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I also grant permission to all the foregoing to use any photograph, motion picture, recordings, or any other record of the Event for any legitimate purpose.

Signature _____ Date: ___ / ___ / ___

Parent/Guardian Signature: _____