



SATURDAY, DECEMBER 7

REGISTRATION	8:30-9:45 AM
5K RUN	10:00 AM
JINGLE BELL JOG	10:15 AM
AWARDS	11:30 AM

SMITHFIELD COMMUNITY PARK
600 M. DURWOOD STEPHENSON PKWY

REGISTRATION FEE: ONE UNWRAPPED TOY
TOYS GO TO HARBOR AND DSS ANGEL TREE PROJECT

REGISTRATION FORM

NAME OF PARTICIPANT: _____

PARENT/GAURDIAN (if minor): _____

ADDRESS: _____

GENDER: **M** **F** EVENT: **5K** **FUN RUN** AGE: _____ BIRTHDATE: ____/____/____

EMAIL: _____ PHONE: _____

WAIVER OF LIABILITY

I understand that injuries do occur while running or walking. I am assuming all risks associated with running or walking in this event. Having read this waiver I release and agree to hold harmless Smithfield Parks and Recreation Department, Smithfield Recreation & Aquatics Center, and the Smithfield Police Department, the sponsors, volunteers, and employees associated with this event, and its agents from any claims arising out of injury.

PARTICIPANT / GAURDIAN SIGNATURE: _____ DATE: _____

