

40th Annual Paju Mountain Run Registration Form



Name.				
Date of Birth:		Sex:	Female	Male
Mailing Address:				
Email:				
Emergency Contact:				
Division : Please c	ircle your age division			
Junior (Under 20)	Open (20- 29)			
Senior (30 – 39)	Masters (40 –49)			
Veteran (50 & Up)				
Event: Please circ	le the event you wish to register for:	Run	Wall	<
Cost:				
Early Registration	on/ before July 14 - \$45.00			
Late Registration a	fter July 14 - \$55.00			
T-Shirt only availab	ole for early registration - \$20.00			
Paper Registration	Handling Charge - \$5.00			
	yable to the Township of Red Rock) ace Day for registrations after July 14 th bas			lability not guaranteed)
abide by any decision of a radincluding high heat and/or hur your accepting my entry, I her any and all sponsors, their repnature whatsoever arising out waiver extends to all claims opermission to sponsors and o	a potentially hazardous activity. I should not enter and ruce official relative to my ability to safely complete the run midity, traffic and the conditions of the road. Having read reby for myself, my heirs, executors, administrators or an oresentatives and successors, from all claims or liability to f, or in the course of, my participating in this event whife every kind or nature whatsoever, foreseen or unforese or agents authorized by them to use any photographs, vicinors will be accepted only with a parent or legal guardian	a. I assume all risk this waiver and k nyone else who m for death, persona ether same be car en, known or unkr deotapes, motion	s associated with ru knowing these facts hight claim on my be al injury, or property used by negligence nown. The undersig	unning in the event, , and in consideration of ehalf, waive and release / damage of any kind or or fault. This release and ined further grants full
Participant Signature (over the	e age of 18)			
Parent or Guardian Name (un	der the age of 18)			
Parent or Guardian Signature	:			