

PO Box 172 Collins, NY 14034

Circle One:

PHONE

STREET ADDRESS

CITY, STATE & ZIP

 5K Run
 5K Walk
 1/2 M

 5K Shirt Size
 GCS RATE NO SHIRT

 XS
 S
 M
 L
 XL
 XXL

 Sex:
 Age on race day
 Age on race day

Declaration and Release: In consideration of you accepting my entry and permitting me to attend or participate therein, I intend to be legally bound for myself, my heirs, executors and administrators to waive and release any and all rights and claims for personal injury or other damages I may now or in the future have against the sponsors of this event. Gowanda Area Chamber of Commerce, NYSDOT, Village of Gowanda, Race Committee and their representatives, agents or assigns for any and all personal injuries, damages, losses and injuries suffered from or incurred by competing in or attending this event.

Signature