

# The Sixth Annual Color Run For The Cure

5K Run/Walk

Saturday, June 1, 2018

Check in at 9:00, Race at 10:00

A Relay for Life Team Event

**Race Location:** Harlan Fairgrounds (314 4th Street, Harlan, Iowa)

**Proceeds:** All proceeds will go to benefit the American Cancer Society

**Entry Cost Information:**

- ★ **\$25.00 per participant including t-shirt. Late and day-of registrations are \$30.00.** Make checks payable to: The Color Run for the Cure. Please put registration money in an envelope and return by May 20th.
- ★ **NO REFUNDS ISSUED FOR ANY REASON!**

**Contact Information:**

[etorneten@hcsdcyclones.com](mailto:etorneten@hcsdcyclones.com), [sanderson@hcsdcyclones.com](mailto:sanderson@hcsdcyclones.com)

**Drop registrations off at any Harlan Community School District front office or mail to**

Seth Anderson, 1501 800th st. Harlan IA, 51537

**Bring day of Registrations To:**

Harlan Fairgrounds (314 4th Street, Harlan, Iowa) on June 1st

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Please Print Legibly. Cut on dotted line and drop off at any HCSD Office with payment.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: (M) or (F)

Address: \_\_\_\_\_ State, City, Zip Code: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Grade (if child): \_\_\_\_\_

Shirt Size(Circle One): Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult XXL

**Waiver (MUST BE SIGNED)**

In consideration of you accepting this entry, I, the below signed, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against the race, and sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will participate in this event as a footrace/walk (bikes, dogs, strollers welcome), that I am physically fit and sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeness, as well as any photographs and any record of this event in which I may appear for any legitimate purpose, including advertising and promotion.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian if Under 18: \_\_\_\_\_