



Saturday, June 12, 2010

First Name _____ Last Name _____

Date of Birth __/__/____ Age on 6/12/2010 _____ Sex M F

Address _____ City _____

State _____ Zip _____ Email _____

T-Shirt S M L XL XXL Youth small Youth medium

I will participate as 5k Individual 5k Team Prostate Survivor

Children (if entering with dad as a 5k team) –

Child Name _____

Date of Birth __/__/____ Age on 6/12/2010 _____ Sex M F

T-Shirt S M L XL Youth Small Youth Medium

If you have a child doing the 50 yard dash free do not add them to this form – There will be a special form to sign at pickup

Packet Pick-Up: (Tuesday 6/8/2010 – Thursday 6/10/2010) 10:00 a.m. to 7 p.m.

Run-On Dallas Run-On Richardson Run-On Coppell Run-On McKinney Race Day

WAIVER STATEMENT: Entry invalid if not signed. In consideration of the acceptance of this registration entry, I the undersigned assume full and complete responsibility for any injury or accident, which may occur during my participation in the event or while I am on the premises of the event. I hereby release and hold harmless The Urology Research & Education Foundation, Dadfest, Mellow Productions, the sponsors, promoters and all other persons and entities associated with the event or their agents or employees, or otherwise. I will not enter and participate unless medically and properly trained. I also know that although police protection will be provided, there may be traffic on the course route. I assume the risk associated with this event, including but not limited to falls, contact with participants, alcohol consumption, the effects of weather including high heat and/or humidity, and the conditions of the road, all such risks being known and appreciated by me. I further grant my permission to use any photographs, videotape, motion pictures, recordings, or any other record of this event. T-shirt size is not guaranteed. Fees are non-refundable. I have read the forgoing and certify my agreement by this signature, and my parent's/ guardian's if under 18.

Signature: X _____ Date: _____

Parent or Legal Guardian Signature, for minor: X _____

Date: _____

- \$25 through Race Day\$ _____
- \$30 Dad & Child 5k (Child 12 & under through race day\$ _____
- \$40 Dad & Child 5k (Child 13 & over) through race day.....\$ _____
- \$10 Children 12 & under\$ _____
- Please add my donation to UREF\$ _____
- Total Enclosed (All Fees are Non-Refundable)\$ _____**

Mail application with check or money order payable to **UREF** to:

Dadfest

P.O. Box 852856

Richardson, TX 75085