

Running for Veterans, 2017 Registration Form

NAME: _____

ADDRESS: _____

CITY : _____ ST: _____ ZIP: _____

Age Group (please circle) Under 19 19-29 30-45 46+

T-shirt Size (please circle) Medium Large X-Large XX Other _____

I certify that I am in good health and have trained for this event. In consideration for your acceptance of this entry, I hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the organizations and sponsors holding this event, their agents, representatives, successors, and assignors, for any and all injuries by me at said event.

Signed (by parent or legal guardian if participant is under 18 years of age) _____ Dated _____



Event sponsored by



405 8th Ave NW
Aberdeen, SD
605/275-6500

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Please complete as many forms as needed and return, along with \$20 per person, to:

Aberdeen American Legion
Running for Veterans
Po Box 2052
Aberdeen, SD 57402

Please use a separate form for each runner/walker, but feel free to enclose a single check for all.

Make checks payable to "The American Legion"

Entries received by May 13th are guaranteed a T-shirt; shirts may be available later but are not guaranteed.

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