

Rose City Virtual 5K Walk/Run

Saturday, April 3-24, 2021

- **DATE** — April 3-24, 2021. May complete your selected course and record your time any time in this three week period.
- **WHERE** — Your high school track, Cherokee Lake, your neighborhood or the certified Rose City Walk 5K (3.1 mile) course.
- **ENTRY** — \$21 by April 15, 2021. **NO LATE REGISTRATION. NO REFUND.**
- **AWARDS** — Ultra cotton T-shirt with 2020 design on front and 2021 design on back (a souvenir shirt), a specially designed tote bag and a gift from a previous Rose City Run event.
- **AWARD PICK-UP** — “Drive by” pick-up at Scott Elementary School on 100 North Hansell Street, Thomasville, Georgia on **SATURDAY, APRIL 24, 2021 FROM 8 TO 11 A.M.** Bring your verification form. The school is one block from the Rose City 5K course.

ROSE CITY 5K WALK/RUN VERIFICATION FORM

On _____, 2021, I walked/ran (circle one) 5,000 meters (3.1 miles) in _____ minutes and seconds at the Rose City Walk Course/the track/Cherokee Lake or my neighborhood (circle one).

PRINT NAME _____

SIGNATURE _____

DETACH AND KEEP THE TOP COPY TO TURN IN ON T-SHIRT PICK UP DAY

NAME: _____ (first) _____ (last)

MAILING ADDRESS _____ (street or box)

_____ (city) _____ (county) _____ (state) _____ (zip)

PHONE: _____ AGE (As of 04/24/21): _____

BIRTHDATE: _____ SEX: _____ E-MAIL: _____

EMPLOYER AND

CLUB AFFILIATION: _____

CIRCLE ONE: T-SHIRT SIZE: Youth Large or Adult S M L XL XXL (\$2 extra) XXXL (\$3 extra)
ENCLOSED IS \$ _____ \$21.00 by April 15, 2021 — No late registration. No refund.
(Make check payable to Rose City Run)

Name and number of emergency contact _____

For and in consideration of my being allowed to participate in the Rose City Walk/Run (hereinafter “the event”) on behalf of myself, my heirs, personal representatives and assigns, I hereby assume all risks and waive all claims for injury or illness which may result, directly, or indirectly, from my participation in the event and agree to indemnify and hold harmless the City of Thomasville, the Thomasville YMCA, sponsors, organizers and their respective employees, elected officials, appointed officials and any other person or entity associated with the event of and from all actions and claims, including attorney’s fees, which may be incurred by reason of my participation in the event. I understand that anyone entering the event who is not adequately trained is taking a definite risk of suffering physical ailments. I do hereby state that I have trained properly and that I am physically prepared to participate in the event, and I expressly assume the risk of any illness or injury which may result from my participation in the event.
 I authorize the use of any photograph, moving picture, or any other graphic depiction made immediately before, during or after my participation in the event by the organizers or others and I expressly waive any claim or privilege or privacy, or right to compensation for the publication of any such photograph, film or other graphic depiction.

 Signature of Entrant

MAIL ENTRY FORMS TO:

ROSE CITY WALK/RUN

P.O. Box 1037 Thomasville, Georgia 31799
 (229) 226-9878

E-MAIL: rcr@ymca-thomasville.org

May register online:

www.ymca-thomasville.org
 click on Rose City Run events and registration and verification form