

John P Tobin Memorial Road Race to benefit the Children's collection at the Hanson Public Library

Race Registration Form

Last Name _____

First Name _____

Age _____ Sex M F

T-shirt size _____

Address _____

City _____

State _____ Zip _____

Email _____

Phone _____

USATF # _____

Club/ Team Affiliation _____

Note: Please write clearly in order to produce accurate race results. Not writing clearly is not the responsibility of Race Officials producing improperly spelled race results.

Please make checks payable to the John P Tobin Memorial Road Race

Adult registration \$20.00 before 11/22/09

\$25.00 race day registration

Kids Race \$5.00

Sunday, December 6, 2009

11am sharp

Kids Race 10:15

Mail Registration to:

Tobin Race c/o

Hanson Public Library

132 Maquan Street, Hanson

02341

Contact: Eileen Comeau

(781) 534 -2344

ecomeau_906@comcast.net

www.johntobinroadrace.com

Liability Waiver Form

I understand that running a road race is potentially a hazardous activity. I further understand that I should not enter a road race unless I am medically able and properly trained. I agree by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running this event including, but not limited to, falls, contact with other participants, the effects of the weather, including high/heat or humidity, traffic conditions of the road, all such risks being understood and appreciated by me. I having read the waiver and understand these facts, and in consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, wave and release Jim McCorkle, 5K Sports and all sponsors, their representatives and successors from any claims or liabilities or causes of action of any kind arising out of my participation in this event.

Signature _____

Date _____

Parent if under 18 _____
