Saturday, February 28, 2015 ◦ 10:00 AM Start

North Buncombe Middle School
Weaverville, NC

8K Timed Race & 1 Mile Fun Run

To register, please complete this form (and sign waiver) and mail it to:
North Buncombe Middle School
51 N. Buncombe School Rd., Weaverville, NC 28787

Email questions to: NBMS8K@gmail.com
Website: nbms8k.wix.com/chillychallenge8k

RUNNER INFORMATION:

Name _____ **Age-Race Day** _____ ❒ Male ❒ Female

Address _____ **Phone Number** _____ **DOB** _____

City _____ **Zip** _____ **Email** _____

Cool Vintage T-Shirt size:

Y-M	Y-L	A-S	A-M	A-L	A-XL	A-XXL

Current School Attended _____ **Grade** _____

Event:	✓	**Entry Fee** *before 2/1/15*	✓	**Entry Fee** *on or after 2/1/15*	**Amount Enclosed**
8K Individual Adult (19 and over)		$25		$30	
8K Individual Youth (18 and under)		$15		$20	
8K TEAM (**Team name:** _____) *8 team members minimum.* *Please enclose in one envelope a completed registration form for each entrant along with full team registration fee.*		$20 per adult team member $15 per youth		$25 per adult team member $20 per youth	
1 Mile Fun Run		$15		$15	

*(Make checks payable to **NBMS PTO**)*

Waiver: I fully understand that running a road race is a potentially hazardous activity. I should not enter or run unless I am medically able and properly trained to safely complete the event for which I am submitting this entry form and fee. I agree to abide by any decision of a race official relative to my ability to safely complete this event. I further agree to surrender my race bib and timing chip to any race official if directed to do so for any reason. I assume all risks associated with participating in this race including but not limited to: falls, contact with other participants, effects of weather, heat, cold or precipitation, vehicular traffic, the condition of roads or trails: all such risks being known and appreciated by me. Having read this waiver, knowing these facts and in consideration of this entry, I for myself and anyone for whom I am entitled to act waive, release, and hold harmless the race organizers, Buncombe County Schools, North Buncombe Middle School PTO, North Buncombe Middle School, and all agents, employees, officers, directors and volunteers working for those entities from any claims and liabilities of any kind arising out of or related to my participation in this event. I also understand that baby joggers and strollers, roller skates and pets are not allowed on the course at any time during this event. I further acknowledge that I have read and fully understand the race organizer's refund policy for this event as published here.

Refunds: Race Organizers reserve the right to alter, postpone or cancel the race in the interest of participant and/or public safety.

_____ _____

Parent or Adult Participant Signature Date