



Harrison Junior Auxiliary

Trace Trammell 5K memorial Run/Walk

April 2, 2011

8:00 A.M. RAIN or SHINE

Race Begins at the Harrison Junior High Parking Lot

Friday April 1, 2011 5:30-6:30 p.m.: Registration and t-shirts/bibs pickup at the First National Bank Soccer Complex Concession Stand
Saturday April 2, 2011 7-7:30 a.m.: Registration and t-shirt/bibs pickup near the starting line.

Limited t-shirts!! Register before 3/1/2011 to guarantee your shirt.

ENTRY FEE: Make checks payable to Harrison Junior Auxiliary (no refunds)
Before 3/1/11.....\$20.00 (Post-marked by 3/1/11 to Guarantee T-shirt)
After 3/1/11.....\$25.00
DIVISIONS:
*Runner, Male *Walker, Male *Runner, Female *Walker, Female

Please detach and mail with payment to:

**HARRISON JUNIOR AUXILIARY
P.O. BOX 823
HARRISON, AR 72601**

(PLEASE PRINT)

Name _____ Birth date (required) _____ Gender _____

Age on 4/2/11 _____

Address _____ Daytime Phone () _____

City, State, Zip _____ Evening Phone () _____

Email Address _____

T-shirt Size -- (circle one) YS YM YL AS AM AL AXL AXXL

5K RUN 5K WALK (circle one)

Questions? harrisonja5k@yahoo.com

RACE RELEASE (must be signed on or before registration)
I know that participation in races are potentially hazardous activities. I should not enter and participate in this race unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participation including, but not limited to falls, contact with other participants, the effects of the weather, including high heat, extreme cold, and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Trace Trammell 5K, the Harrison Junior Auxiliary, the city of Harrison, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the race and/or club activities even though liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Participant Signature _____

Date _____

Guardian Signature (if under 18) _____

Date _____



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GROUP REGISTRATION

\$18 per participant (minimum of 10 participants)

This group form must be accompanied by an individual race entry form for each participant

GROUP REGISTRATION DEADLINE **3/1/11**

Group Name: _____

Individual Participants (minimum of 10)

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____
- 15 _____
- 16 _____
- 17 _____
- 18 _____
- 19 _____
- 20 _____
- 21 _____
- 22 _____
- 23 _____
- 24 _____
- 25 _____