

RUN THE VALLEY REGISTRATION FORM

Send completed entry form and check payable to Golden Valley Human Services Fund by April 10 (3 pm), to:

GVHSF

c/o Golden Valley Park & Recreation

200 Brookview Parkway S

Golden Valley, MN 55426

Name: _____

Address: _____

City: _____

State: _____ **ZIP:** _____

Day Phone: _____

Email: _____

Age on Race Day: _____ **Amount Enclosed:** _____

VISA/Mastercard #: _____

Expiration Date _____

Signature _____

Male Female

Preferred* T-shirt size: S M L XL

**T-shirt size guaranteed if registered by March 1.*

Event:

0.2K Kid's Fun Run 5K Run 5K Walk 10K Race

Release Form

I am entering this event at my own risk and assume all risk and responsibility for injuries I may incur as a direct or indirect result of my participation in this event. I for myself and my heirs and executors, also agree not to hold any participating sponsor or supporters or the directors, employees, and agents of such parties responsible for any such injury or damage suffered. I verify that I have full knowledge of the risks involved with this event, and that I am physically fit and sufficiently trained to participate in it.

Signature of runner/walker

Signature of parent or guardian if racer is under 18

Prefer to register online? Go to zapevent.com or active.com.

Questions? Call 763-512-2345