



OFFICIAL RACE ENTRY FORM

CREDIT CARD REGISTRATION AVAILABLE VIA ACTIVE.COM.

SEE "REGISTRATION" PAGE AT WWW.TIMBERWOLF5K.COM.

MAIL COMPLETED ENTRY FORM WITH CHECK OR MONEY ORDER TO:

TIMBERWOLF 5K c/o NHS ATHLETIC BOOSTERS CLUB

4515 PORTOLA PARKWAY, IRVINE, CA 92620

| EVENT* | EARLY REGISTRATION FEE (by JAN 29) | REGISTRATION FEE AFTER JAN 29 |
|--|------------------------------------|-------------------------------|
| <input type="checkbox"/> 5K RUN | \$30 | \$35 |
| <input type="checkbox"/> 5K WALK | \$30 | \$35 |
| <input type="checkbox"/> 5K RUN NHS STUDENT/FACULTY | \$25 | \$30 |
| <input type="checkbox"/> 5K WALK NHS STUDENT/FACULTY | \$25 | \$30 |
| <input type="checkbox"/> 1K FUN RUN | \$20 | \$25 |
| <input type="checkbox"/> 1K KIDS' RUN (AGE 12 & UNDER) | \$20 | \$25 |

ENTRY FEES:

*** REQUIRED FIELDS**

FIRST NAME* _____ MI _____

LAST NAME* _____

GENDER:* M: F:

BIRTHDATE:* _____ / _____ / _____
MM DD YYYY

EMAIL: _____

PHONE:* _____ - _____ - _____
Day: Evening:

ADDRESS:* _____

CITY:* _____

STATE:* _____

COUNTRY:* U S A

ZIP:* _____

SHIRT SIZE:* (NAVY BLUE TEE SHIRT with TIMBERWOLF 5K LOGO)
(CHECK ONE): YM YL S M L XL XXL

TOTAL ENCLOSED: \$ _____ CHECK NO. _____

NOTE: ENTRY FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Donations to "FAMILIES FORWARD" can be made at WWW.FAMILIES-FORWARD.ORG/DONATIONS.HTM.

EMERGENCY CONTACT: Name _____ Phone _____

WAIVER:
I am aware that participating in athletic events may involve some risks or injury. I hereby voluntarily assume all risks associated with participation and agree to exonerate and save harmless Northwood High School (NHS), their agents, servants, employees, the NHS athletic staff, NHS Athletic Boosters Club, the physicians, athletic trainers, and other practitioners of the healing arts treating me from any and all liability, claims, causes of action or demands of any kind and nature whatsoever which may arise by or in connection with participation in any activities related to Timberwolf 5K Run/Walk. The terms herof shall serve as a release and assumption of risks for my heirs, estate, executor, administrator, assignees and all members of my family.

PARTICIPANT'S SIGNATURE: _____ DATE: _____

(PARENT'S SIGNATURE IF ENTRANT IS UNDER 18 YEARS OF AGE)

Looking forward to seeing you on Saturday, February 18, 2012.