

Please make checks payable to : Palo Alto Weekly MOONLIGHT RUN and mail to : Palo Alto Weekly Moonlight Run, P.O. Box 1610, Palo Alto, CA 94302
ONE ENTRY FORM PER PERSON

CHECK ONE

ON RACE DAY

SEX

M F

AGE

(12 & under - include adult t-shirt size and \$10)
 (If you are 13-17, please read the instructions above)



LAST NAME

FIRST NAME

ADDRESS

APT #

CITY

STATE

ZIP

T-SHIRT

(Adult Sizes Only)

S M L XL XXL

5K WALK
7:15 P.M.

10K RUN
8:15 P.M.

5K RUN
8:45 P.M.

PHONE

WAIVER: In consideration of your accepting my entry, intending to be legally bound do hereby for myself, my heirs, executors and administrators, waive, and release any and all rights and claims that I may have against the persons and organizations affiliated with the run and sponsoring agencies, and the assignees for any and all injuries suffered by me while traveling to and from, and while participating in the Moonlight Run, or associated activities September 28, 2007. I further attest that I am physically fit and sufficiently trained for participation in this event.

SIGNATURE OF REGISTRANT (parent or guardian if under 18 years of age)

DATE

AMOUNT

17 and under must have this on Race Night

EMAIL

VISA/MASTERCARD

EXP. DATE

AMOUNT

NAME ON CARD (PLEASE PRINT)

SIGNATURE

PHONE