



COUNTRY CLASSIC
RUN WALK BIKE

20TH ANNUAL COUNTRY CLASSIC

MAY 4, 2019

YOUTH RUN REGISTRATION FORM (12 YEARS AND UNDER)

Please print, complete, and mail this form to:
Turkey Hill Country Classic
2601 River Road
Conestoga, PA 17516

ALL FIELDS ARE REQUIRED. PLEASE PRINT CLEARLY.

CHILD'S NAME:	_____	PARENT OR GUARDIAN NAME:	_____
ADDRESS:	_____	PHONE:	_____
APT/UNIT#	_____	EMAIL:	_____
CITY/STATE/ZIP	_____	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
CHILD'S AGE ON RACE DAY:	_____		

Waiver and Release: Please read prior to signing entry form.

I hereby request permission to participate in the Turkey Hill Country Classic Youth Run. In consideration of the entry being accepted, I, intending to be legally bound for myself, my heirs, executors, and administrators, waive and release any and all rights I have against the organization holding this event, its agents, representatives, sponsors, successors and assigns for any and all injuries suffered by me or damages out of, or related to, the event. I grant permission to use photos of me and release my name for any and all event purposes. All of the forgoing has been read by the undersigned and voluntarily been signed.

SIGNATURE:	_____	DATE:	_____
(PARENT OR GUARDIAN MUST SIGN)			

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