

# Coppell 5K Run / Fun Run/Walk

Benefitting Coppel Special Olympics Teams

Walk-Up Registration - Individual

**Bib Number Assigned (Internal Use)** \_\_\_\_\_

\_\_\_\_\_  
**Name (Last, First)**

\_\_\_\_\_/\_\_\_\_\_  
**Email Address** / **City, State**

**Age on 6/30/2018** \_\_\_\_\_ **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Gender (M/F)** \_\_\_\_\_

**IN CASE OF EMERGENCY**

Name of local friend or relative:	Relationship to Registrant:	Phone Number: (     )
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**Please check appropriate box:**

- \$35 - 5K **LATE** Registration - **Timed?** Yes or no
- \$25 - Fun Run/Walk – **LATE** Registration
- \$0 - Fun Run/Walk – Age 5 and younger

Amount Collected: \$ \_\_\_\_\_ Cash Check

**Waiver (REQUIRED)**

In consideration of this entry, being accepted, I hereby for myself, heirs, executors and administrators waive and release any claims that I may have against GetYouInShape.com, LLC , The City of Coppell, Special Olympics Inc, Special Olympics Texas, Inc., RunTIME, or any of the sponsors involved in the 5k Fun Walk/Run. I certify that I am physically able to participate in this event.

**X** \_\_\_\_\_  
Signature (parent/guardian signature) Print Name