

2018 Laurel Run Entry Form (OR register online at www.laurel-run.com)

Name _____

Address _____

Phone _____ E-mail Address _____

Date of Birth ____ / ____ / ____ Age on 7/21/18 _____ Gender M F

Shirt Size (circle one) Youth: S M L Adult: S M L XL 2X 3X 4X

Event 8K Run 5K Walk 1K Walk Children's Runs

Team Name _____

ENTRY FEES (8K, 5K and 1K)
NOTE: These fees increase \$5 on July 17

Youths (age 17 and under) \$15

Adults (age 18 and older) \$20

Laurel Run entry *plus* TRC Membership (see info at left) \$25

CHILDREN'S RUNS (7 & younger)
 \$3 per child, or \$5 total for a family with 2 or more children

Please make your check payable to **Laurel Run** and mail to:

Filling the Gap, Inc.
 92 Fairmount Avenue
 Jamestown, NY 14701

Earn FREE entry into Laurel Run by raising \$50 or more in pledges!
 Use the form below, or you can visit www.crowdrise.com/fillingthegapinc to set up your fund-raising web page.

Support people with disabilities by becoming a Member of TRC

Money raised through Laurel Run goes to Filling the Gap, Inc., which works with The Resource Center to improve the lives of people with disabilities in Western New York. We invite Laurel Run participants to show their support for our mission by becoming members of The Resource Center. Membership dues are \$10 per year, but we're offering Laurel Run entrants a \$5 discount on their 2018 TRC Membership. Your membership enables us to have a stronger voice when we advocate on behalf of people with disabilities. As a thank-you for becoming a member, you'll receive a membership card that entitles you to discounts at area businesses!

Injury Waiver

I know that participating in Laurel Run is a potentially dangerous activity. I should not take part in Laurel Run unless I am medically able and properly trained. I agree to abide by any decision of an official relative to my ability to safely participate in Laurel Run. I assume all risks associated with participating in this event, including but not limited to contact with other participants, falls, weather conditions including humidity and temperature, traffic and the actions of motorists and adjoining landowners whether unintentional or intentional, and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Filling the Gap, The Resource Center, USATF, Chautauqua Striders, UPMC Chautauqua WCA, Chautauqua Region Community Foundation, Laurel Run organizers, sponsors, and volunteers and their employees, agents and successors from all claims or liabilities of any kind arising out of my participation in this event. I further grant permission to any or all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature _____

Signature of parent or guardian if participant is under 18 _____

Laurel Run Pledge Form *Raise \$50 or more in pledges and receive **free entry** into Laurel Run. Raise \$150 or more and receive a gift card to a store of your choice!*

*Collect all contributions in advance. Bring this form with you the day of Laurel Run or mail in advance to: Filling the Gap, Inc., 92 Fairmount Avenue, Jamestown, NY, 14701. DO NOT MAIL CASH. Have donors make checks payable to **Laurel Run**.*

Participant's Name: _____ Phone Number: _____

NOTE: Thanks for supporting people with disabilities by collecting pledges! You can also raise money by creating a personal, online fund-raising page that you can link to your social media accounts. Visit www.crowdrise.com/fillingthegapinc

Sponsor's Name*	Address or E-mail Address	Phone	Amount

** Those donating money in support of Laurel Run may be added to our mailing lists. Please note that those donating \$10 or more will be considered a member of The Resource Center UNLESS they put an asterisk next to their name.*