

# REGISTER TODAY!

Drop Off or Mail Your

Registration Form with Payment to:

Manna on Main Street, Attn: Race To End Hunger  
606 East Main Street, Suite 1001, Lansdale, PA 19446

Please make checks payable to *Manna on Main Street*.

## I am registering for:

- 5-Mile Race** - \$35 by February 14; \$40 by March 28; After March 29 \$45
- 5K Race** - \$30 by February 14; \$35 by March 28; After March 29 \$40
- Fun Run** - \$10 by February 14; \$15 by March 28; After March 29 \$20
- FREE** - I am registering a child age 5 or under for Fun Run, with paid adult.  
Participating child's name: \_\_\_\_\_

## Tech Shirts!

Race shirts will be available for participants through March 15, 2020. You can opt to receive a shirt during registration. Shirts may be available at Packet Pickup or on Race Day but are not guaranteed past March 15.

Please check only one size:

Adult     S     M     L     XL     XXL  
or Child size     S     M     L

## Participant Information (print clearly)

First Name \_\_\_\_\_  
Last Name \_\_\_\_\_  
Address \_\_\_\_\_ Suite/Apt \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Phone \_\_\_\_\_  
Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

**PLEASE READ CAREFULLY:** In consideration of my participation, I hereby agree for myself, my heirs, my executors and administrators to waive any and all rights and claims for damages I may have against Manna on Main Street, a Pennsylvania nonprofit corporation, the sponsors, coordinating groups and individuals associated with the event, their representatives, successors and assigns and will hold them harmless for any and all injuries I may suffer in connection with said event. Also, none of the above are responsible for the loss of personal items or any other form of aggravation in connection with said event. I have been warned that I must be in good health to participate in this event. I give permission for the free use of my name and picture in any broadcast, telecast, electronic or print media account of this event. I also hereby consent to permit emergency treatment in the event of injury or illness. If I am registering a participant who is under 18 years of age or an incapacitated adult, I represent and warrant that I am the parent or legal guardian of that party and have the legal authority to enter into this agreement on their behalf.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(If Under 18)