

# Saturday, October 14, 2017 8:00AM

REGISTRATION ALSO AVAILABLE AT

[WWW.INSPIREDKC.COM](http://WWW.INSPIREDKC.COM)

<b>FIRST NAME</b>		<b>MIDDLE INITIAL</b>	<b>LAST NAME</b>
<b>STREET ADDRESS</b>		<b>BIRTHDAY (00/00/0000)</b>	<b>AGE ON 10.14.2017</b>
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	
<b>CONTACT NUMBER</b>		<b>EMAIL</b>	
<b>EMERGENCY CONTACT NAME</b>	<b>CONTACT NUMBER</b>	<b>RELATIONSHIP</b>	

ENTRY FEES (NO REFUNDS)	5K	TEAM	KIDS 4-12 YEARS	LCPA STUDENTS	Adult T-SHIRT \$15.00 Child \$10.00 Circle one Yes - No Size	T-Shirt SIZES W/ ADDITIONAL CHARGE	
						Adult M Youth M	
UNTIL 10.29.16	\$25	\$20	\$10	\$15	Adult S Youth S	Adult M Youth M	2X - \$15 + \$2 = \$17
					Adult L Youth L	XL	3X - \$15 + \$3 = \$18
RACE DAY	\$30	\$25					4X - \$15 + \$4 = \$19

<b>Donation Amount</b> \$ _____  <b>MAKE CHECKS PAYABLE TO:</b> <b><u>Friends of Community Preservation</u></b>  <b>MAIL COMPLETED FORM AND PAYMENT TO:</b>  <b>ATTN: TEAM INSPIRED</b> <b>P.O. Box 413921</b> <b>Kansas City MO 64141-3921</b>	<b>ENTRY FEE</b> \$ _____ <b>ADDITIONAL CHARGE FOR T-SHIRT 2X, 3X, or 4X (see above)</b> \$ _____ <b>TOTAL AMOUNT ENCLOSED</b> \$ _____
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**CHOOSE ONE RACE CATEGORY**

- 5K - INDIVIDUAL**                       **5K TEAM - 3 OR MORE TEAM NAME** \_\_\_\_\_  
 **5K CLERGY CHALLENGE**    **CHURCH AFFILIATION** \_\_\_\_\_  
 **KID'S RUN (4-12 YEARS)**

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ARE YOU A WALKER OR RUNNER?                      WALKER     RUNNER

ARE YOU A TRIPLE NEGATIVE BREAST CANCER SURVIVOR?     YES  NO

ARE YOU A BREAST CANCER SURVIVOR (OTHER THAN TNBC)?     YES  NO

\*\*\*READ AND SIGN WAIVER ON BACK\*\*\*

Bib# \_\_\_\_\_ Paid



## RELEASE AND WAIVER OF LIABILITY

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This release and waiver is executed on Saturday, October 14, 2017.

I know that running is a potentially hazardous activity. I should not enter this event unless I am medically able and properly trained.

I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including but not limited to falls, contact with other participants, the effects of weather including high heat and/or humidity, the condition of the road and traffic on the course. All potential risks are known and appreciated by me. Having read this waiver and knowing these possibilities, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release the INSPIRED BY DARRELL 5K, all sponsors, their representatives and successors from all claims of liabilities of any kind, including any claims arising out of negligence of aforementioned parties, arising out of my participation in this event.

I grant my permission to all of the foregoing to use any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

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SIGNATURE OF PARTICIPANT

DATE

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PARENT/GUARDIAN SIGNATURE IF UNDER AGE 18

DATE