



**Third Annual Cincinnati
World Down Syndrome
Day 5K Run/Walk
Winton Woods Harbor
8:30am Registration
Race begins at 10am**



March 25, 2012

Registration Form

First Name _____
Last Name _____

Team Name _____

Street _____
City _____ State ____ Zip _____

Email _____
Phone _____

I will participate in the:

___ 5K Run ___ 5K Walk

Category:

___ Male ___ Female

Age (on race day) _____

\$20 individual registration fee
\$150 for a team of 10

T-shirt:

All pre-registered participants in the 5K run or walk will receive a t-shirt. Supplies may not be available on the day of the race.

(Additional pre-registered shirts may be purchased for \$10 each)

___ Child ___ Adult ___ Small
___ Medium ___ Large ___ XLarge

Waiver:

In consideration of the acceptance of my entry, I, for myself, my executors, administrators and assignees, do hereby release and discharge, officials, volunteers and other sponsors involved in the WDSO 5K from all claims of damage, demands or actions whatsoever in any manner arising or

growing out of my participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event; I am physically fit and sufficiently trained to participate in this event. By signing, I hereby give permission without compensation to use my likeness in photographs for purposes of promoting the "WDSO 5K".

Signature _____
Date _____

Parent Signature (if under 18)

Date _____

Contact in case of emergency:

Name _____

Phone _____

Payment

Please charge my "WDSO 5K" Registration Fee to my:
___ Visa ___ MasterCard ___ Am Express

Card # _____

Expiration _____

Cardholder's Signature _____

Or make checks payable to DSAGC:
March 15, 2012 registration deadline

**Mailing Address:
World Down Syndrome Day 5k
12157 Huntergreen Drive
Cincinnati, Ohio 45251
(513) 535-9647**