

NAME: (LAST) _____ (FIRST) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SEX: Male Female AGE ON JULY 4: _____ BIRTHDATE: _____

TELEPHONE: _____ HS ATTENDED _____ YEAR GRADUATED _____

EMAIL: _____

TEAM COMPETITION: Team Name _____ Team Captain _____

TEAM CATEGORY: Men Women Coed

TEAM DIVISION:

- Elementary School Middle School High School Collegiate Open Masters (40+)
 Seniors (60+) Corporate Government Running Clubs

EVENT: I AM ENTERING 10K Run 4.5 Mile Mayor's Fitness Walk Wheelchair

ADULT SHIRT SIZE: (Check One) S M L XL XXL (Add \$1)

CHILD SHIRT SIZE: (Check One) S M L (\$10 w/ entered adult)

Make checks payable to Butte To Butte and mail to:

Butte To Butte
 P.O. Box 5862
 Eugene, OR 97405

	Shirt	No Shirt
Thru 7/3	\$20	\$15
XXL T-Shirt	+\$1	
OTC Member	-\$1	
Child's Shirt	\$10	
ENTRY FEE	\$ _____	\$ _____

BIB # _____

NOTE: Children 12 and under are free in either the Run or Walk when accompanied by an entered adult. T-shirts for children receiving free entry may be purchased for \$10.00 each.

MANDATORY WAIVER (Please read and sign below) I know that a road race/walk or wheelchair event is a potentially hazardous activity. I should not enter and participate in this event unless I am medically able and properly trained and have sufficient stamina to safely and successfully complete this event without harm or injury to myself. In consideration of the acceptance of my entry, my heirs, executors, administrators and assigns, waive, release and discharge any and all rights and claims for damages against the Butte To Butte race directors and designated race officials, The Oregon Track Club, Eclectic Edge Events, LLC, City Of Eugene, County Of Lane, Willamette Beverage Co., Pepsi®, Aquafina®, and all other participating sponsors, agents and employees of such parties for all claims of damages, demands, actions, whatsoever in any manner arising from my participation in this event. I grant permission to all of the foregoing the use of any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

Signature (Parent/Guardian if under 18) _____ Date _____