GROUP REGISTRATION FORM 20-MEMBER MINIMUM

Group Name:			Group T-Shirt Color	
Organizer Name:				
Organizer Address:				
City:	State:	Zip:	Phone:	
Email:				



Lansdowne Economic Development Corporation (LEDC) 32 E Baltimore Ave Lansdowne, PA 19050 www.Lansdowne5K.com Info@LansdownesFuture.org





NOV 2. 2019 - 8:30 am start time!

EVENT HELD RAIN OR SHINE

Starts 8:30 am across from Lansdowne Theater (30 N. Lansdowne Avenue).

On-site registration begins at 7:00 AM

Absolutely NO LATE late participants after the on-time participants start the event.

Lansdowne 5K Harvest Run, Saturday, Nov 2, 2019

Group registrations must be received by the LEDC on or by October 5, 2019

Number of participants X \$ 20.00 each = Total Funds Due Enclosed

· · · · —		——————————————————————————————————————	
Each participant must fill out and sign the following registrations.			
lame:	N	lame:	
Address:	A	Address:	
City:	c	City:	
State: Zip: Phone:		State: Zip: Phone	
		mail:	Ane (as of 11/2/10)

Release: In consideration of being permitted to participate in this event, I hereby for myself, my heirs, and personal representatives assume any all risks which might be associated with the event and further waive, release, discharge and covenant not to sue sponsors, officials, contributors, organizers, volunteers and beneficiaries or their successors and assignees for any and all injuries or damages of any kind whatsoever suffered by me as a result of taking part in the event and/or any related activities. I also give permission for free use of my name and picture in any broadcast, telecast or other accounts of the event.

T-Shirt Size (circle one): YS

Gender: M F

picture in any	broadcast, telecast or other accounts or t	ne event.
Signature:		Date:

T-Shirt Size (circle one): YS Gender: M F

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