Individual Registration Form an also be found online at

https://uwrandolph.org/form/thehuman-race-registration-form

This is for individuals that are not part of a team!

Individual Registration Fill Out Form

Must be filled out completely and signed in order to participate

Name	
Address	
Email Address	
Phone	
Non-Profit Organization	n to Receive Contributions
Γ-Shirt Size: (Size Quanti	ities are Limited)
Adult Small	Adult Medium
Adult Large	Adult X-Large
Adult XX-Large	
Please check the appropriat	te boxes below:
Walker	Male
Runner* Age:	Female
Mutt Strutt*	

* Runners and Mutt Strutt participants must turn in at least \$30 to cover the cost of timing

Please read the Waiver and Sign Below

In consideration of your acceptance of my application, I for myself, my executors, administrators and assignors, do hereby release the Volunteer Center, the City of Asheboro, the Human Race and its sponsors and coordinators, or their successors, from all claims of damages, demands, actions, and causes of action whatsoever, in any manner arising or growing out of my participation in these events. I further attest that I am physically qualified to participate in these events, and understand that the weather and ground conditions may be hazardous. I give permission to The Volunteer Center and the City of Asheboro to use, without limitation or obligation, photographs, film footage or tape recordings which may include my image or voice for purposes of promoting The Volunteer Center.

Signature / Da	ite
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Parent's Signature (if participant is under 18 years of age)

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Na	ne
Ad	Iress
Em	ail Address
Pho	nne.
FIII	nic .
No	n-Profit Organization to Receive Contributions
T-SI	irt Size: (Size Quantities are Limited)
	Adult Small Adult Medium
	Adult Large Adult X-Large
	Adult XX-Large
Plea	e check the appropriate boxes below:
	Walker Male
	Runner* Age:
	Mutt Strutt*
_	

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Male

Female

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Signature / Date

Adult Large

Adult XX-Large

☐ Walker
☐ Runner* Age:_

■ Mutt Strutt*

Please check the appropriate boxes below:

Parent's Signature (if participant is under 18 years of age)

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Signature / Date

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Contribution Form

Make all checks payable to The Human Race

Walker's/Runner's Name		
Non-Profit Organization to Re	ceive Contributions	

Contributor's Name	Phone or Email	Amount
	Total:	

THE HUMAN RACE

Contribution Form

Make all checks payable to The Human Race

Walker's/Runner's Name		
Non-Brofit Organization to Bossi		

Contributor's Name	Phone or Email	Amount
	Total:	



Contribution Form

Make all checks payable to The Human Race

Walker's/Runner's	Name		
Non-Profit Organiza	tion to Receive	e Contributions	

Contributor's Name	Phone or Email	Amount
	Total:	



Contribution Form

Make all checks payable to The Human Race

Walker's/Runner's Name	

Non-Profit Organization to Receive Contributions

Contributor's Name	Phone or Email	Amount
	Total:	