



RSCC Falling Footsteps

Application
Name:______Age ____
* Sex: M F (Circle One) (on 9/13/15)
Address_____

Amount _____

e-mail

WAIVER

In consideration of acceptance of this application, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, administrators, and assigns waive any and all rights and claims for damages I may have against the Richfield Springs Community Center, their representatives and successors for any and all injuries suffered by me at the races to be held in Richfield Springs, on **Sept. 13, 2015**. I verify that I am physically fit and have trained sufficiently for the competition. **Signature Parent Signature**

> Please make Checks payable to: "<u>RSCC</u>" Mail in with Applications to:

Falling Footsteps

The Richfield Springs Community Center cordially invites you to participate in the annual Falling Footsteps 5K Minimudder. **Part of the proceeds will benefit the Youth Basketball Hoop Fund.**

Route 20 Series:



Go to <u>www.nyroute20.com</u>

THANK YOU TO OUR SPONSORS!

Bill Kosina: 1434 Cty Hwy 25 Richfield Springs, NY 13439 Questions: 315-749-3286 jabkos@verizon.net

<u>The Richfield Springs</u> <u>Community Center Run</u>

