

# SOUTHERN WESLEYAN UNIVERSITY

## 4th Annual Run 2 Fall 5K Race

October 30, 2015

Registration begins at 8:00 pm

\$25 for Adults

\$10 for Children (12 years & under)

\$10 for Currently Enrolled SWU Students



*Let it Glow!*  
SOUTHERN WESLEYAN UNIVERSITY  
*4th annual*  
**RUN 2 FALL 5K**

### SWU's Run 2 Fall 5K Registration Form

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE Group (circle one): 12 & Under 13-17 18-24 25-29 30-39  
40-49 50-59 60-69 70 & over

GENDER (circle one): M F Email Address: \_\_\_\_\_

T-SHIRT SIZE (circle one): S M L XL XXL

STATUS (circle one): Currently Enrolled SWU Student Alumni Faculty/Staff Community

SWU Alumni Year? \_\_\_\_\_ Friend Parent Youth (12 & under)

RUNNER/WALKER STATUS (circle one): Runner Walker Run/Walk

DEPARTMENT (SWU Faculty/Staff Only): \_\_\_\_\_

EMERGENCY CONTACT (name and phone #): \_\_\_\_\_

MEDICAL INSURANCE CO/POLICY #: \_\_\_\_\_

Student/Faculty/Staff ID (optional): \_\_\_\_\_

**Please read and sign waiver. Waiver must be signed to participate in race. Signature of parent or guardian is required if participant is under 18 years of age.**

As a participant in Southern Wesleyan University's Run 2 Race 5K, I do hereby and forever discharge and agree to hold harmless Southern Wesleyan University, its trustees, officers, employees, volunteers, and race sponsors from all claims, demands, suits, awards, and judgments for any and all injuries and/or damages to my person or property which may result from my participation in this activity or before/after the race. I specifically release and discharge said operators, sponsors, and volunteers from all injuries or damages arising from or contributed to by any physical impairment I may have, whether latent or patent, and agree they are under no obligation to provide a physical examination or other evidence of my fitness to participate in such an event, the same being my sole responsibility. I also give permission for the free use of my name and picture in any broadcast, telecast, or other written account of the event.

PARTICIPANT'S SIGNATURE: (If under 18 must be signed by parent/guardian)

\_\_\_\_\_

DATE: \_\_\_\_\_

**Make checks payable to:** Southern Wesleyan University, and in the memo line note: Staff Council/5K

**Mail form and entry fee to:** SWU Run 2 Fall 5K

ATTN: Nikki Hanson  
Southern Wesleyan University  
P.O. Box 1020  
Central, SC 29630

"Online Registration Powered by Active.com"