



Individual Entry and Donation Form

We recommend registering online at runsignup.com/Race/WV/Davis/RunFort to streamline the process. This form is only for those who can't register online. Please be advised, incomplete entry forms WILL NOT be processed.

Name _____

E-mail _____ Phone _____

DOB _____ Age on Race Day _____ Gender _____

Address _____

City _____ State _____ Zip _____

Please pick an event:
(NOTE: NO RACE DAY CHANGES ALLOWED)
 2k and Virtual 2k are walk ONLY events
 5k and Virtual 5k are run/walk events
 2k is NOT a timed/first-to-finish event

2k
 5k
 Virtual 2k
 Virtual 5k

Team Name: _____

After September 21, 2024, please register on site at the Davis Fire Hall on Friday, September 27, 2024 from 5:00 PM - 7:00 PM, or on Saturday, September 28, 2024 from 8:00 AM - 9:30 AM.
RACE DAY REGISTRATION CLOSSES AT 9:30 AM ON SEPTEMBER 28, 2024. NO EXCEPTIONS!

\$ _____ **Entry Fee (\$12.00)**
Half of each entry fee will directly support your chosen cause.

\$ _____ **Team Donation**
 Team Name: _____
Team sponsor donations may be made to your team, another team, or multiple teams. Donations qualify as charitable contributions and tax receipts will be issued for every donation. The team or cause receives 100% of this donation.

\$ _____ **TOTAL**
*Make checks payable to TCF-RFI, and mail to P.O. Box 491, Parsons, WV 26287. Make sure to write your team name on the memo line. All Forms and fees MUST be postmarked by **September 21, 2024** for processing.*

WAIVER OF LIABILITY
Signature of Racer is REQUIRED (or signature of Parent/Guardian if Racer is under 18)

I, _____, am participating in this event either for myself or as the legal parent or guardian of, _____. By participating in this event, I release the event sponsors, organizers, volunteers, and/or members of the Board of Directors of the Tucker Community Foundation from any claims for damages or injuries that may occur during the event. I waive any claim that I or my child might have against the event sponsors, organizers, or volunteers for any damages arising out of, or in any way relating to, our participation in this event.

In case of an injury or illness suffered by myself or my child, I hereby consent to and permit emergency medical treatment and accept responsibility for any costs incurred. I also grant the Tucker Community Foundation the right to use photographs or videotape taken of myself and/or my child for use in Tucker Community Foundation materials. I waive any right to royalties or other compensation related to the use of those photographs or videos.

Signature: _____ Date: _____