



FULL MOON IN JUNE RUN REGISTRATION

OFFICE USE ONLY
Bib Number

Always the first Saturday in
June

START TIMES:

Registration: 7 p.m. MT
2-Mile Run/Walk: 8 p.m. MT
5K & 10K: 9 p.m. MT

LOCATION:

General Services Shop
Directly east of Tribune
on County Road Q

Name:

Gender:

Age:
As of race day

Birthday:

Mailing
Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Email:

Registration: 7 p.m. MT at the General Services Shop.
Participants can pre-register by submitting this form along with payment to
Please make checks payable to Full Moon in June and mail to:
Greeley County Health Department
P.O. Box 537
Tribune, KS 67879

Awards: Trophies to top male and top female overall finishers. Medals will be awarded to top three in each race.

In which race(s) will you participate: Family 2-Mile Run/Walk 5K 10K

For 5K & 10K Runners Only

T-Shirt Size: (please select): Adult S Adult M Adult L Adult XL Adult XXL
Extra T-Shirts \$20 (select size): Adult S Adult M Adult L Adult XL Adult XXL

RELEASE OF LIABILITY:

In consideration of the acceptance of my entry in the Full Moon in June Run, I, the undersigned and, if less than 18 years of age, my parent or guardian, do so at my own risk. I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that, although police protection might be provided, there could be traffic on the course route; therefore I assume the risk of running in traffic. I also assume any other risks associated with running this event including, but not limited to, falls, contact with other participants, the effects of weather, conditions of the road, and encounters with animals. I understand I am solely responsible for my own safety while traveling to and from or participating in this event. Knowing these facts, I hereby for myself, my heirs, executors, administrators, or anyone else who my sue on my behalf covenant not to sue, and waive release, and discharge the sponsors, or contributors to this event, any race officials, volunteers, Unified Greeley County, Greeley County Health Department, and Greeley County Recreation Foundation, their representatives, successors, or assignees from any and all claims of liability for death, personal injury, or property damage of any kind or nature whatsoever arising out of, or in the course of my participation. I also give permission for the free use of my name and/or pictures in broadcasts, telecasts, newspapers, poster, advertising, etc. I understand that the entry fees are non-refundable.

SIGNATURE: _____ Date: _____

Parent or guardian signature for participants under 18: _____ Date: _____

Emergency contact and phone number: _____

Registration Fees

Family 2-mile:	<input type="checkbox"/> \$10.00
Regular 5K/10K	<input type="checkbox"/> \$30.00
2 Mile + 5K/10K	<input type="checkbox"/> \$35.00
SWFTR—\$5 discount on 5K/10K	<input type="checkbox"/> -\$5.00
Extra T-Shirts	<input type="checkbox"/> \$20.00/shirt

For more information, please contact
Greeley County Health Department
(620) 376-4200

Or email Tribune_run4fun@hotmail.com

Total []