

# ENTRY FORM



\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
E-Mail

**SEX**    M    F      **T-SHIRT**    XXL    XL    L    M    S  
**COURSE**    13.5 Mile    43 Mile    57 Mile

RACE RELEASE: IN CONSIDERATION OF YOUR ACCEPTANCE OF THIS RACE ENTRY, I, FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS, FOREVER RELEASE AND DISCHARGE ANY AND ALL RIGHTS, DEMANDS, CLAIMS FOR DAMAGES AND CAUSES OF SUIT OR ACTION KNOWN OR UNKNOWN, THAT I MAY HAVE AGAINST ROCKWALL ROTARY CLUB, THE CITY OF ROCKWALL AND ANY AND ALL PARTICIPATING RACE SPONSORS, AND DIRECTORS, OFFICERS, EMPLOYEES AND AGENTS OF SUCH PARTIES, FOR ANY AND ALL INJURIES IN ANY MANNER ARISING OR RESULTING FROM MY PARTICIPATION IN SAID RACE. I ATTEST AND VERIFY THAT I HAVE FULL KNOWLEDGE OF THE RISKS INVOLVED THE RACE, THAT I ASSUME THOSE RISKS, THAT I WILL ASSUME AND PAY MY OWN MEDICAL AND EMERGENCY EXPENSES IN THE EVENT OF AN ACCIDENT, ILLNESS OR OTHER INCAPACITY, REGARDLESS OF WHETHER I HAVE AUTHORIZED SUCH EXPENSES AND THAT I AM PHYSICALLY FIT AND SUFFICIENTLY TRAINED TO PARTICIPATE IN THIS RACE. I RELEASE THE RIGHTS TO ANY AND ALL PHOTOGRAPHIC MATERIAL AND COMPUTER INFORMATION ROCKWALL ROTARY RIDE MAY WISH TO RELEASE FOR THIS EVENT WITHOUT OBLIGATION TO ME.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Parent If Under 18

**ENTRY FEE**   \$30.00 if postmarked by August 1st  
                      \$35.00 if postmarked after August 1st or on Race Day  
                      \$10.00 Child/13.5 mile route

*\*Make Checks Payable & Mail To: **Rockwall Rotary Ride, P.O. Box 446, Rockwall, TX 75087***

**SATURDAY, AUGUST 14, 2010 • 7:30 AM • WILKERSON-SANDERS STADIUM**  
Register online at [www.rockwallrotary.org](http://www.rockwallrotary.org)