

~ Entry Form ~

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ email _____

Date of Birth _____ age on race day _____ Sex: M F

5-K Run ____ 10-K Run ____ 5K run/Walk ____ Bicycle Tour ____

Entry Fee-Run: \$15.00 if postmarked by July 20; \$18.00 late including day of race

Entry Fee - Ride: \$20.00 if postmarked by July 20; \$22.00 late including day of ride

Shirt Size: S M L XL

Contact Person: Fran Taylor, Executive Director, Cambridge Main Street

Phone: 740.439.2238 Email: director@downtowncambridge.com

Make check payable to: **Cambridge Main Street** and mail to:
627 Wheeling Avenue - Suite 204, Cambridge, OH 43725

Online registration available at: www.downtowncambridge.com

Waiver: In consideration of acceptance of this entry to the Cambridge Downtown Classic and Countryside Ride, I waive all claims by myself, my heirs and assigns against the race sponsors, promoters, or official sponsors due to injury or illness, which may result from my participation. I attest and verify that I have full knowledge of the risk involved in these events. I am physically fit and sufficiently trained to participate. I have read the above statement, I understand it, and my signature confirms its full acceptance.

Signature

Parent/Guardian signature, if under age 18