



Presents

# The Hickory Mountain 10K Trail Run



## Registration

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Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ T-shirt size \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Emergency contact and phone # \_\_\_\_\_

**Make checks payable to: Career and Educational Pursuits**

**Mail payment and registration form to: Lydia Odell; 330 Franklin St.; Brevard, NC 28712**

In consideration of the entry, I for myself, my heirs, and assigns, hereby release the sponsors, race workers, and officials of this race from any and all liability arising from illness and damages I may suffer as a result of participation in such event. I attest that I am physically fit and have sufficiently trained for this event and am aware that participation in any of these events could, in some circumstances, result in severe soreness or injury. I also give permission for free use of my name and picture in any broadcast/telecast or written account of the event. I understand that the entry fee I pay is Non-Refundable. Should road race officials determine that the completion of this event would be injurious to my health, I consent to be removed from the course and treated by the physician in attendance or of their direction.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent if under 18 years of age: \_\_\_\_\_