

# MIKE JENSEN MEMORIAL

## SATURDAY APRIL 3<sup>rd</sup>, 2010

### FUN RUN & WALK

Two or five mile run/walk, you decide.....

Run/walk begins at 10:00 a.m.; late registration begins at 9:00  
Lewiston Kiwanis park on the levy

Cost: \$20 Pre-registration with Beanie, or t-shirt, \$10 without  
Pre-registration ends March 31<sup>st</sup>  
\$25 late registration with Beanie or t-shirt, \$12 without  
Shirt size XXL, XL, L, M, S Beanie is one size fits all

All proceeds will go to the Mike Jensen Memorial scholarship ship at Lewiston High school  
Or The Willow Center for Grieving Children

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#### Registration Form (Please Print)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M or F  
Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please indicate beanie or shirt: \_\_\_\_\_, shirt size: \_\_\_\_\_

Please indicate race distance: 2 mile\_\_ or 5 mile\_\_

**Please Read the following statement and sign before submitting entry.**

I know competing in a fun run is a potentially hazardous activity. I should not enter and compete unless I am medically able and properly trained. I assume all risks associated with competing in this event, including, but not limited to falls, contact with other participants, the effects of weather, traffic, interactions with non-participants and the conditions of the road all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I, myself and anyone entitled to act on my behalf, waive and release any and all sponsors and organizers, their officers, agents and assigns, the race director and volunteers from all claims or liabilities of any kind arising out of my participation in this even though that liability my arise out of the negligence or carelessness on the part of the persons named in this waiver. **I also understand that my entry fee is non-refundable and non-transferable.** A parent must sign if the child is under 18 years of age. This certifies that the child has permission to participate and agrees to the previously stated waiver.

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

Parent/Guardian (if under 18 years of age): \_\_\_\_\_ Date: \_\_\_\_\_

Please mail registration to Michelle Hill, attention Mike Jensen run.  
1906 birch drive, Lewiston Id 83501

