

20th Annual Diane Burr Memorial 5K Flag Run/Walk

Sunday November 7, 2021 – Kids Fun Run at 2 PM, 5K at 2:15 PM

PLEASE PRINT CLEARLY

Name: _____

Sex: M or F Date of Birth: _____ Age (on 11/7/21) _____

Address: _____

Town: _____ State: _____ Zip: _____

Phone #: _____ email: _____

T-shirt size: SM M LG XL 2XL 3XL

Please enter me in the 2021 20th Annual Diane Burr Memorial 5K Flag Run/Walk.

In consideration of this entry being accepted, I do for myself, or any person or concern who may, on my behalf, hereby hold harmless and release the Annual Diane Burr Memorial 5K Flag Run/Walk, the Diane Burr Memorial Fund, the Town of Thomaston, the State of Connecticut, all sponsors, volunteers and race officials from any and all claims for personal injury, damages arising out of, or connected with, my participation, including but not limited to, falls, contact with other participants, the effects of weather, and the conditions of the course. I am physically fit and assume responsibility for my own safety.

Signature: _____ Date: _____

Entry Fee (non-refundable): \$25. Amount enclosed: _____

Make checks payable to: Diane Burr Memorial Fund

Mail entry form with payment to:

Joyce Olsen, 993 Old Northfield Rd Thomaston, CT 06787