NO STAPLES PLEASE

A Your Info

Register online at www.celebrateall.org or complete the four parts below. If you're on a team give your entry form and fee to your team leader. For your entry to be eligible, complete the entire form. **One form per person.**

Has your name changed since your last participation? ❑ NO ❑ YES Previous name: _____

LAST NAME: *(One form per person please)* FIRST NAME: M.I.

MAILING ADDRESS: Is this a new address since your last participation? ❑ NO ❑ YES

CITY: STATE: ZIP CODE:

EMAIL ADDRESS: *Your email address will only be used for Celebration communication. It will not be sold to outside parties.*

DAY PHONE: ( ) - BIRTH DATE (MM/DD/YEAR): / / CODE: W 1

TEAM NAME: *Remember… If you're on a team, give your Entry Form and check to your Celebration Team Leader* • Team Deadline is September 10th

Are you staying in a hotel? ❑ NO ❑ YES # of Nights: _____ Which hotel? _____

B T-Shirt Size

You MUST select a size in order to receive your T-Shirt. If no size is selected you'll automatically be assigned a LARGE.

Adult Sizes

❍ S ❍ L ❍ XXL

❍ M ❍ XL ❍ XXXL

Youth Sizes

❍ YS (6-8) ❍ YM (10-12)

Tiny Tot Sizes

Tiny Tot shirts are ONLY available to participants 5 and under. No exceptions!

❍ 12M ❍ 2T ❍ 3T ❍ 4T

Pick-up your T-Shirt & Race Number at the **Women's Show**
September 23 & 24 • 10am-8pm
Boise Centre

Please note: Shirts are ordered months in advance. We'll do our best to fulfill your request but cannot guarantee size.

St Luke's Women's Fitness Celebration **5K Run, Walk & Stroll**

Official 2010

Individual Entry Form

Saturday, September 25 • 8:30 a.m. • Idaho State Capitol

What do you Celebrate?®

C Wave & Entry Fee

Register online & save! Receive additional savings on Individual and Team Entries through online registration. Visit **www.celebrateall.org** today!

1 Select your wave…

TIMED, COMPETITIVE WAVES
(includes timing chip)

❑ **Red Wave** Competitive Run

❑ **Yellow Wave** Fitness Walk
Must WALK the entire course; no running.

FUN, FRIENDS & FAMILY WAVES

❑ **Purple Wave**
Non-Competitive Run or Walk *(No wheels)*

❑ **Blue Wave**
Non-Competitive Run or Walk *(No wheels)*

❑ **Orange Wave**
Family/Stroller/All Wheels Division

RACE DAY REGISTRATION

❑ **Race Day Registration**
Blue, Purple & Orange Waves Only
Register on Saturday, September 25, Capitol Park, Downtown Boise

2 Check your entry fee…

Individual Entry Fee: ***Register online & save!***

ADULT (18+)	TEEN (13-17)	CHILD (6-12)
❍ $29	❍ $23	❍ $21

Team Member Entry Fee:

ADULT (18+)	TEEN (13-17)	CHILD (6-12)
❍ $26	❍ $21	❍ $19

Please note: select age at time of event

Individual Entry Fee: ***Register online & save!***

ADULT (18+)	TEEN (13-17)	CHILD (6-12)	TINY TOTS (5 & under)
❍ $25	❍ $19	❍ $17	❍ $10

Team Member Entry Fee:

ADULT (18+)	TEEN (13-17)	CHILD (6-12)	TINY TOTS (5 & under)
❍ $22	❍ $17	❍ $15	❍ $10

Race Day Entry Fee:

ADULT (18+)	TEEN (13-17)	CHILD (6-12)	TINY TOTS (5 & under)
❍ $30	❍ $25	❍ $20	❍ $10

ELITE SEEDING Run, Wheelchair and RaceWalk Exhibition
Visit www.celebrateall.org for Elite Seeding registration information. Elite Seeding Entry Deadline is September 10, 2010.

3 Write your fee here…

Entry Fee ..... $ _____
One form per person. For additional forms, please visit www.celebrateall.org

My Gift ..... $ _____
St. Luke's Celebration
Women's Health Fund

❍ I am unable to attend the 5K this year, but please accept my gift.

Total Due ..... $ _____

Please enclose a check or money order payable to:
St Luke's Celebration
PO Box 170 • Boise, ID 83701-0170
To use your credit card, please register online.

D Waiver

RELEASE FORM AND WAIVER OF LIABILITY *By accepting waiver, Registrant agrees, warrants and covenants as follows:* In consideration for your accepting this entry, I, the Registrant (or as parent or legal guardian of the Registrant) want to participate in the St. Luke's Women's Fitness Celebration ("Event") on September 25, 2010. I know that participating in a 5K Run, Walk and Stroll is a potentially hazardous activity. I should not enter and participate unless I am medically able and properly trained. I attest that I am physically able to complete this Event and am aware of the dangers & precautions that must be taken when running or walking in warm or cold conditions. I also agree to abide by any decision of an appointed medical official relative to my ability to safely continue or complete the event. I further assume and will pay my own medical & emergency expenses in the event of an accident, illness or other incapacity regardless of whether I have authorized such expenses. I know that there will be a possibility of traffic on the course. I assume the risk of running or walking in traffic, and I agree to yield to all emergency vehicles. Furthermore, I have full knowledge of and assume any and all other risks associated with running or walking this event including, but not limited to: slips, trips, falls, contact with other participants, the effects of weather and the conditions of the roads, including high heat, cold weather, precipitation, illness, personal injury, and death; and all such risks are known, understood and accepted by me. Because the Event is relying on these representations and in consideration of the Event accepting my entry, I hereby for myself, my heirs, executors, administrators, personal representatives, successors and assigns, or anyone else who might claim on my behalf, covenant not to sue, and I waive, release and discharge any and all Event sponsors, including St. Luke's Regional Medical Center, Ltd., Idaho Women's Health and Fitness Education Celebration, Inc., and its affiliates, the City of Boise and its police department, Ada County Highway District, and any and all event officials, volunteers, sponsors, contributors, and organizers & their officers, directors, employees, agents & representatives, successors, & assigns, or anyone acting for or on their behalf from any and all rights, claims, causes of action or liability for death, personal injury or property damage of any kind or nature whatsoever arising out of or in the course of my training or participating in the Event or related events; even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

I hereby grant full permission to use any photographs, videotapes, motion pictures, recording, or any other record of this event for any legitimate purpose at any time. I further understand that there are no entry refunds, exchanges, transfers or rollovers, and that the event may be cancelled due to severe weather conditions, natural disasters, or threats to local and national security including suspected terrorist activity. I also hereby affirm that I am eighteen (18) years of age, have read this waiver carefully & understand it. If less than 18 years of age, parent/guardian of participating minor must submit entry on the minor's behalf. As the parent/guardian, I hereby acknowledge and execute the foregoing Waiver release for and on behalf of the minor named herein. In submitting this form I hereby authorize medical treatment for any injuries sustained during this event. It is understood that parent/guardian assumes full risk for and on behalf of said minor. I have read this Release Form and Waiver of Liability carefully, understand its significance, and voluntarily agree to all of its terms.

MUST BE SIGNED TO BE VALID

SIGNATURE DATE

SIGNATURE OF PARENT/GUARDIAN (If participant is under 18) DATE

For Office Use Only

NO BICYCLES, ROLLERBLADES, or SKATEBOARDS ★ NO DOGS PERMITTED ★ NO REFUNDS, NO EXCEPTIONS ★ COPIES OF THIS FORM ARE OK ★ THIS IS NOT A LATEX-FREE EVENT