



NORTH OMAHA 5K WALK/RUN FOR MINORITY HEALTH AND FITNESS

ENTRY FORM

Name: _____
 Address: _____
 City & State: _____ Zip Code: _____
 Email Address: _____
 Phone: _____ Fax: _____
 My Vocation: _____
 I am representing the following organization / employer: _____
 Sex (Check One): Male Female Age: _____ Birth Date: _____

In order to participate in the CTI22 1st Annual North Omaha 5K Walk/Run, I do for myself my heirs, and my administrators waive, release, and forever discharge any and all claims for damages which I may have or which may hereinafter accrue to me or my heirs against CTI22, the sponsors, officers, and agents thereof. I certify that I am in good physical condition and I recognize this is a physical event, and that the weather conditions can vary from extreme heat to extreme cold in short periods of time.

Signature: _____ Date: _____

5K Walk or 5K Run [5 Kilometers = 3.1 miles] \$ 5.00

CTI 1st Annual North Omaha 5K Walk/Run T-Shirts (Circle size below) \$FREE
 Small · Medium · Large · XLarge · XXL

I'm enclosing a one-time TAX DEDUCTIBLE donation of: \$ _____
 Your TAX DEDUCTIBLE donation is greatly appreciated!

GRAND TOTAL \$ _____

MAKE CHECKS PAYABLE TO "Community Telecast, Inc."

MAIL ENTRIES TO:



Community Telecast, Inc.
 P. O. Box 11558
 Omaha, Nebraska 68111

MEDALS TO: By age division, 5K Run Finishers 1ST THRU 3RD with ribbons to 4TH THRU 6TH
 SPECIAL AWARDS: Certificate of Completion to all participants!