

Knights of Columbus 2017 Respect Life 5K Run/Walk Team 5K and Kid's Fun Run

When Saturday, July 22nd 2017 @ 8:00 AM
Where Light of the World Roman Catholic Church
10316 W Bowles Ave
Littleton CO 80127



Registration: Online: register on Active.com by July 20th 2017
Mail-in: postmarked no later than July 18th 2017
Race Day: 7:00 AM - 8:00 AM

Support the cause of life by participating in the Knights of Columbus 2017 Respect Life 5K! Join your friends and neighbors as we rally together and run/walk for the cause of protecting the unborn! Proceeds from the race will be used to assist in the purchase of an ultrasound machine for a pregnancy crisis center in Colorado as part of the Knights of Columbus Ultrasound Initiative Program.

Do you have questions? Please contact us via email at respectlife5K@gmail.com.
Visit us on the web at <http://respectlife5K.org>

=====

Knights of Columbus 2017 Respect Life 5K Saturday, July 22nd, 2017
Return forms and payment to: K of C Council 12567, 10316 W Bowles Ave, Littleton CO 80127

Name: _____ **Gender:** M or F **Age on race day:** _____

Address: _____
Street City State Zip

Email: _____ **Phone Number:** _____

<small>(select)</small>	Registration Status	Fee
_____	5K Individual Registration (through July 20 th , 2017)	\$30.00
_____	5K Team Registration (all teams due by July 15 th , 2017) <small>(Fee is per person. Team members must complete page 2)</small>	\$25.00
_____	5K Race Day Registration (July 22 nd , 2017)	\$35.00
_____	I want to donate to the cause	\$ _____
	TOTAL DUE	\$ _____

T-Shirt Size (circle one): S M L XL **Register early to be guaranteed your size!**

Payment Information: I would like to pay by (circle one): CASH CHECK

Please make checks out to: K of C Council 12567 Memo: 2017 Respect Life 5K

Liability Waiver (must be signed to participate in the Knights of Columbus 2017 Respect Life 5K)

I understand that running a road race is a potentially hazardous activity. I have read the race flyer and am familiar with the course, procedures and rules. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including cold, snow and/or ice, high heat and/or humidity, rain and/or hail, traffic 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 your accepting my entry, I, for myself and anyone entitled to act upon my behalf, waive and release the organizers of the Knights of Columbus 2017 Respect Life 5K, its directors, officers, staff, volunteers, Light of the World Roman Catholic Parish and its staff and employees, and all sponsors, their representative and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. Further, I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. For runner's safety, I understand that headsets, bicycles, scooters and roller blades are prohibited. Strollers are allowed. There are NO DOGS allowed (except guide dogs). **I UNDERSTAND THAT THERE ARE NO REFUNDS FOR THIS EVENT.**

Signature of Participant: _____ **Date:** ___ / ___ / ___
(Parent or guardian if under the age of 18 on race day)

Team Registration Information (fill out for team participation only; one form per participant)

Team category (select one only):

_____ **Knights of Columbus:** Team made up of at least four Knights from the same Council

Council # _____ Council Name _____

Team Captain _____ E-mail _____

_____ **Parish/Organization:** Made up of at least four members, minimum one female, from the same Parish/Organization

Parish / Organization name _____

Team Captain _____ E-mail _____

Team Name (if more than one team from same Parish/Organization) _____

Additional Team Category Rules and Information:

If you use snail mail (USPS), it is recommended that you mail the registration forms together, if possible. If not, make sure the team captain and council/team name match on each registration. If you decide to register online through active.com, have the team captain register first and then team members can search for the council number or parish/organization name. The captain also has the ability to register (and pay) for all team members online. You may run as a member of **only one** team. Each team must have a minimum of four participants (no maximum limit). The entry fee is **\$25.00 per person** per team. All team members will receive a T-shirt and bib. The four fastest finishers' times count toward the total time. The lowest combined total team time is the winner. For the Parish team category, at least one of the four qualifying times must be female. For example, a Parish team with seven members (six men and one woman) will have a total team time consisting of the female's time and the three fastest male times. **Team entries must be received by July 15th.** All team participants are also eligible for individual awards, the prize raffle, and the pancake breakfast. Do you have questions? Please contact us via email at respectlife5K@gmail.com