OFFICIAL ENTRY FORM

WELLS FARGO SENIOR BOWL CHARITY RUN

Saturday, November 5, 2011

Last Name (Please print)

First Name Middle Initial

Street Address (Street and Number)

City

State Zip Code Telephone Number

Age on Race Day Date of Birth Male Female

E-mail Address:

Check one only:

☐ 10K ☐ 5K ☐ 1-MILE Fun Run

Check one only:

☐ Runner ☐ Walker ☐ Wheelchair

T-shirt size: Registration deadline to receive guaranteed shirt size is October 15.

☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large

Entry Fee:

☐ 10K, 5K, AND 1 Mile: $15 (prior to Nov. 4)

☐ 10K, 5K, AND 1 Mile: $20 (Nov. 4-5)

Method of Payment:

☐ Check or Money Order to: Senior Bowl Charity Run ☐ MasterCard ☐ Visa ☐ Cash

Card No. Exp. Date

Authorized Signature _____

Charity Run School Rewards Program for K-12 Schools (please fill in school's name)

The Wells Fargo Senior Bowl Charity Run reserves the right in the event of an emergency or natural disaster to cancel the race or to start at a later time. In the event of cancellation, the Wells Fargo Senior Bowl Charity Run does not guarantee the refund of entry fees.

RELEASE FORM: In consideration of the Senior Bowl, its sponsors, agents, servants, representatives, licensees, contractors, successors and assigns organizing and conducting the Senior Bowl Charity Run, held on November 5, 2011, and allowing me to participate and run in said race, I hereby waive, release and discharge forever said Senior Bowl and its sponsors, agents, servants, representatives, licensees, contractors, successors and assigns, from any and all claims, demands, rights and causes of action of whatsoever kind and nature arising, directly or indirectly, from any and all known or unknown, foreseen and unforeseen, bodily and personal injury, damage to property and the consequences thereof resulting from my running and/or participating in said Road Race, and Covenant Not To Sue for any said injuries and/or damage. I give permission for the use of my name and/or picture in any broadcast, telecast or other account of this event.

Signature _____ Date _____

Signature of parent or guardian if under 18 _____

PLEASE MAIL ENTRY FORM AND PREFERRED PAYMENT TO:

Senior Bowl Charity Run
Post Office Box 1408 • Mobile, Alabama 36633
Or register online at www.seniorbowl.com