

ENTRY FORM

A FORM MUST BE COMPLETED FOR

EACH PERSON PARTICIPATING IN A
RUN OR WALK.

NO REFUNDS. NO EXCEPTIONS.

Birthdate _____ (must be filled in)

MM | DD | YYYY
____ Male ____ Female

____ WMU student, WIN# _____
(Must include and have ID to claim parking pass prize)

____ Other student ____ Faculty ____ Staff

____ Alumni ____ Friend

● _____
NAME

● _____
ADDRESS

● _____
CITY STATE ZIP

● _____
PHONE

● _____
E-MAIL ADDRESS

Shirt size

____ S ____ M ____ L ____ XL ____ XXL

Race participation (Check one)

____ 5K Fun Walk (not timed) ____ 1K Kids' Fun Run (not timed) ____ 1K Fun Walk (not timed)

____ 5K Run (timed event)

Three- to five-person team participation

(5K Run only/three best scores count/check one)

____ College student ____ K-8 school ____ 9-12 school

____ Nonstudent

Team name _____

Note: All WMU students must list WIN #s. All team members must submit registration forms together. **AFTER THURSDAY, OCT. 22, 2009 TEAMS WILL BE ACCEPTED BUT LISTED AS INDIVIDUAL RUNNERS.**

Race Brochure UR mailing

You must use the D-Tag Disposable System

The Chrontrack D-Tag system is being used to time this race.

There is no return fee with this system.

If you use your own Chip, the time will not be recorded.

Waiver

Registration not valid without signed waiver(s): In consideration of your accepting this entry form, I hereby for myself, my heirs, executors and administrators waive and release all rights and claims for damages I may have against Western Michigan University, its Board of Trustees and the sponsors of the WMU Homecoming Campus Classic, its agents, representatives, successors and assigns for any and all injuries suffered by me at said run, or which may arise out of participation in the WMU Homecoming Campus Classic. **NOTE: THIS MUST BE SIGNED AND DATED IN ORDER TO PARTICIPATE. PARENT MUST SIGN IF PARTICIPANT IS UNDER 18.**

SIGNATURE _____

DATE _____

Fees

	UNTIL OCT. 22	OCT. 23 & 24
# ____ \$ ____ Adult	\$20	\$25
# ____ \$ ____ Student (all)	\$15	\$20
# ____ \$ ____ Child 14 & under	\$10	\$15
# ____ \$ ____ Family (limit 5)	\$45	\$50
# ____ \$ ____ College student team	\$30 per team	\$35 per team
# ____ \$ ____ K-8 school team	\$30 per team	\$35 per team
# ____ \$ ____ 9-12 school team	\$30 per team	\$35 per team
# ____ \$ ____ Nonstudent team	\$55 per team	\$60 per team
# ____ \$ ____ Grand total		

Method of payment

____ Check ____ Money order ____ Credit card

Make check payable to Western Michigan University.

____ Discover ____ Visa ____ MasterCard

ACCOUNT# _____

EXPIRATION DATE _____

PRINT NAME AS IT APPEARS ON CARD _____

SIGNATURE _____

Mail registration to:

WMU, University Relations, 300 E. Walwood Hall, Kalamazoo MI 49008-5433 or fax (credit card registrations only) to (269) 387-8460.

REGISTER ONLINE AT www.wmich.edu/race