



# Zombie Zoup Run

2 miles of scary fun

Saturday  
 October 28, 2017  
 10:00 AM

Jim Riggs Community Center  
 880 18th Avenue  
 Sweet Home, OR

[www.zombiezouprun.weebly.com](http://www.zombiezouprun.weebly.com)

ENTRY FORM: (one form per person)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Gender:            M            F

Age on race day: \_\_\_\_\_

**PAYMENT:**

Race Entry Fee:	\$20.00	11+ years
	FREE	10 years and younger with an adult

TOTAL: \_\_\_\_\_

\*Please make checks payable to

**City of Sweet Home**  
**1140 12<sup>th</sup> Ave**  
**Sweet Home, Or 97386**

Please do not mail cash. Entry fees are non-transferable and non-refundable.

**MANDATORY WAIVER:**

I know that a road race/walk or wheelchair event is a potentially hazardous activity. I should not enter and participate in this event unless I am medically able and properly trained and have sufficient stamina to safely and successfully complete this event without harm or injury to myself. In consideration of the acceptance of my entry, my heirs, executors, administrators and assigns, waive, release and discharge any and all rights and claims for damages against the race directors, and designated officials, Sunshine Industries, City of Sweet Home, Sweet Home Fire & Ambulance District and all other participating sponsors, agents and employees of such parties for all claims of damages, demands, actions, whatsoever in any manner arising from my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

SIGNATURE: \_\_\_\_\_

(Or Parent/Guardian if under 18)

**Note: All entry forms must be signed**

