

HEART RUN

Registration Changes

Timing chips are an additional \$5 per chip

Register On or Before December 31st, 2009 (www.heartrun.com)

Adult.....\$15

Child (under 18).....\$5

*Immediate Family..... \$35

Register January 1st—Midnight April 17th, 2010

All mail-in registrations must be postmarked by April 17th, 2010

Adult.....\$20

Child (Under 18).....\$5

*Immediate Family.....\$45

Register April 18th and after

Adult.....\$25

Child (under 18).....\$15

*Immediate Family.....\$65

**Immediate Family constitutes five family members—up to 2 parents and up to 3 children under 18.*

Waiver:

In signing this form for myself (or if under 18 years of age, by my parent or legal guardian), I understand and agree to absolve and hold harmless the American Heart Association, University of Alaska Anchorage and all sponsors, be they individuals or organizations, single or collective, of all misadventure, harm, loss or inconvenience in any activities associated with the said event. I also fully understand that there will be no refunds granted even if a cancellation of this event occurs. Further, I hereby grant full permission to the AHA and/or its agents to use any photographs, videotapes, motion picture recordings or any other record of this event for any legitimate purpose at any time.

American Stroke
Association
A Division of American
Heart Association

American Heart
Association
Learn and Live.

Anchorage Office
3700 Woodland Dr., Suite 700
Anchorage, AK 99517

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www.heartrun.com **2010 Registration Now Open** www.heartrun.com

Cut ✂

Cut ✂

2010 Heart Run Entry Form

Immediate family members may enter on the same form

| First & Last Name | Age on 4/24/2010 | Sex | Check the race each person will participate | | Bib# |
|-------------------|------------------|-----|---------------------------------------------|-----------------------------------------------|-------|
| 1. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |
| 2. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |
| 3. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |
| 4. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |
| 5. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |
| 6. _____ | | M F | <input type="checkbox"/> *5K Timed 9:30AM | <input type="checkbox"/> 5K/3K non-Timed 10am | _____ |

*Please note \$5 surcharge for timing chip usage for each participant

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Mended Heart? Yes No Teams: Check One Open Company School Team Name: _____

I have read and agree to the waiver on the opposite side of this form: (Please Sign)

Signature: _____ Date: _____



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