ARLINGTON	Race Date: Sa	ation Form 2024 It, Sep 7, 8:00 am Start Iton Elementary School
	-	11825 Douglas Street, Arlington
Individual	\$35.00	
□ Part of Group of 3	\$95.00	Early Packet Pick-up:
Part of Group of 5	\$150.00	Thursday, Sep 5, 3:00-6:00pm
Sponsor Entry	\$0.00 (first 2 entrants)	Friday, Sep 6, 8:00-11:00am
Spansor Namo if part of sp	onsor ontry	Chamber Office: 6280 Chester St, #101, Arlington
Sponsor Name if part of sponsor entry 6280 Chester St, #101, Arlingto		
First Name	Middle Initial	Last Name
Gender: M F (Circle One)	Birth Date:	Age on Race Day:
E-mail:		
Address	City	State Zip
Phone		
Shirts are dri-fit, <u>sizes run s</u>	ailable sizes: Youth M, Youth L, A small. Early registration assures y sizes are gone, closest size will be	our size is reserved; shirts reserved
I was encouraged to register by Teacher or staff men		(if applicable) at
	Teacher or staff memb	er School
By registering for the Arlington 5K, you waive all parties involved from liability.		
Participant Signature		Date
Signature of Authorized Person if Participant is under 18 years of age		