



**Make checks payable to:**  
 Baltimore Women's Classic 5K  
**Mail to:**  
 Baltimore Women's Classic 5K  
 PO Box 751  
 Cockeysville, MD 21030

*Please fill out one entry form per participant. Entry fees may be combined in one check. Completed form(s) must be postmarked by JUNE 18, 2010.*

## Baltimore Women's Classic 5K Race Registration Form -Sunday, June 27, 2010-

Event (circle one)				5K		Kids Fun Run (Co-ed 8 and under)			
Entry Fee (circle appropriate, enclose check)				\$25 <small>(through March 31)</small>	\$30 <small>(April 1 through race day)</small>	\$10 <small>(through June 1)</small>	\$15 <small>(June 2 through race day)</small>		
Please accept my additional donation of:				\$ _____					
First Name			Last Name						
Address									
City, State, Zip									
Sex	M	F	Age on race day	Date of Birth			/	/	
Email			Daytime Phone			-	-		
Shirt Size (circle one)				S	M	L	XL		
Are you running with a team?				Yes	No				
If yes, what is your Team Name?									
Team Captain									
Team Captain Phone			-	-		Team Captain Email			
Are you running with your mother/daughter?				Yes	No		Her name		
How did you hear about the race? (circle one or more)				TV	Radio	Magazine	Brochure	Poster	
				Running Store		Friend	Other: _____		

### Waiver/Release Must be Signed Before Mailing:

In consideration of the acceptance of my entry, I, on behalf of myself, my executors, administrators and assignees, hereby release and discharge the Baltimore Women's Classic, City of Baltimore, Race Director, Charm City Run, and all other sponsors of all claims of damage, injury demands, and actions whatsoever in a manner arising from my participation in this athletic event. I attest and verify that I have full knowledge of the risks involved in this event and am physically fit and sufficiently trained to participate.

\_\_\_\_\_  
 Signature (parent or guardian if under 18)

\_\_\_\_\_  
 Date