



2009 Darien Road Race September 20th - 1:00 PM

In consideration of my entry being accepted, intending to be legally bound, I do hereby for myself, my heirs, executors, and administrators, waive, release and forever discharge any and all rights for claims and damages, which may have and which may hereafter accrue to me against The Community Fund of Darien and/or the Darien Road Race, and/or any board members, officers, committee members, race director, volunteers and/or agents damages which may be sustained and suffered by me in connection with my association with or entry or participation in this Darien Road Race/Community Fund event.

PLEASE PRINT ALL INFORMATION BELOW

RACE, (Please choose one): 10K _____ LOOP 1.5 MILES _____

NAME: _____

SEX: _____ DOB mm/dd/yy _____ AGE ON RACE DAY _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____ PHONE: _____

T-SHIRT (To first 250 registrants)

SIZE (Please circle one) ADULT S M L XL YOUTH L

SIGNATURE: _____

(Parent or guardian must sign if under 18)

ENTRY FEE: \$25 pre-entry (\$30 Race day)	\$ _____
ADD A DONATION	\$ _____
TOTAL	\$ _____
CHECKS PAYABLE TO: DARIEN ROAD RACE	
MAIL CHECK AND APPLICATION TO: DRR c/o THE COMMUNITY FUND	
P.O. BOX 926, DARIEN, CT 06820	