

Name: _____
 Address 1: _____
 Sprint Employee Mail Stop #: _____
 City: State: Zip: _____
 Phone Number: (____) _____ Cell Phone: (____) _____
 E-mail: _____
 Age on 11/26/09: _____ DOB: _____ / _____ / _____
 5K Long-Sleeve Shirt: : S M L XL XXL Male or Female
 Kids Fun Run Shirt (Youth Sizes): S M L
 5K Run/Walk Wheelchair



November 26, 2009

Thru November 12

- \$22 Individual
- \$19 Seniors (age 50 and older)
- \$19 Combo (per person)*
- \$18 Family of 5 (per person)*
- \$ 9 Fun Run (12 and under)

Sprint Employee Discount thru November 21

- \$20 Individual
- \$17 Seniors (age 50 and older)
- \$17 Combo (per person)*
- \$16 Family of 5 (per person)*
- \$ 7 Fun Run (12 and under)

Thru November 25

- \$25 Individual
- \$22 Seniors (age 50 and older)
- \$21 Combo (per person)*
- \$20 Family of 5 (per person)*
- \$10 Fun Run (12 and under)

Race Day, November 26

- \$28 Individual
- \$27 Seniors (age 50 and older)
- \$26 Combo (per person)*
- \$22 Family of 5 (per person)*
- \$11 Fun Run (12 and under)

*Entries must be submitted together

Registration fee \$ _____ Additional Donation to Charities \$ _____ TOTAL \$ _____ No refunds, exchanges, or transfers.	Make checks payable to: Kansas City Sports Commission Mail form and check on or before November 20 to: Thanksgiving Day Run 1308 Pennsylvania Avenue Kansas City, MO 64105
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Mandatory Waiver: I know that participating in a road race is a potentially hazardous activity. I will not enter and participate unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risk associated with participating in this event including but not limited to falls, contact with other participants and effects of weather, traffic, and road conditions. Having read this waiver, knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release and covenant not to sue Kansas City Sports Commission and Foundation, Sprint, City of Overland Park, Kansas, USA Track and Field, Sponsors, Race Officials, Volunteers, their representatives, successors, or assignees from any and all claims or liabilities of any kind arising out of or in connection with my participation in this event, including without limitation, claim or liability resulting from those matters described in this paragraph. This release waiver extends to all claims of any kind or nature whether foreseen, known or unknown. The undersigned further grants full permission to Kansas City Sports Commission and Foundation and/or agents authorized by them to use any photographs, video tapes, motion picture, recording or any other record of this event for any purpose.

Signature: _____ Date: _____
 Parent/Guardian Signature (if under 18): _____ Date: _____