# 3rd Annual *Huffing For Stuffing Thanksgiving Day Run*

## Thursday, November 26, 2009

**"Supporting the Gallatin Valley Food Bank"**

# REGISTRATION FORM

**Official Use: Assigned Race #** _____

Please complete the entire form for EACH PARTICIPANT and print clearly.

Mail the completed form with check or money order by November 18th, 2009 to:

HFS Race, c/o John Dudas, 1757 Highland Blvd, unit 1, Bozeman MT 59715.

**Make checks payable to: Big Sky Wind Drinkers.**

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|---|---|---|
| Circle Event: 5K 10K Kids' Run | Circle Gender: Male Female | Circle: Clydesdale / Athena Division **(optional)** Men 200+ #s Women 150+ #s |
| Last Name | First Name | Circle Shirt Size: XS S M L XL |
| Address | City State Zip | |
| Birth Date / Age on Race Day | Phone | Email (for confirmation & results) |

No headphones, roller blades, dogs or bicycles on the race course.
No refunds - it's a fund-raiser!

**Preregistration Fee:**

5K or 10K: $20.00

Kids' Run: **Food Donation**

**Race-day Registration Fee:**

5K or 10K: $25.00

Kids' Run: **Food Donation**

**Additional Donation to Gallatin Valley Food Bank:** _____

**Total:** _____

**Start times**: Kids' Run: 8:10am 10K: 9:00am 5K: 9:15am

**Note**: Kids' Run is FREE with canned food donation. Food collection will be near Starting Line.
Children in the Kids' Run will receive special shirts this year!
All participants are invited to bring food donations for the Gallatin Valley Food Bank!

Registration Date: _____ Amount Paid: _____

**Questions or Comments? Email huffingforstuffing@yahoo.com**

## Event Participant Waiver Agreement and Release: (Must be signed)

By signing this waiver you agree, warrant and covenant as follows: I know that running a road race is a potentially hazardous activity. I am in adequate physical, mental and medical condition to participate in this event. In consideration of acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release, the event directors, BSWD, event sponsors, Montana State University, Museum of the Rockies, Race Volunteers, Race Officials, CCR Timing, State of Montana, Gallatin County, City of Bozeman and all persons and organizations affiliated with the Huffing For Stuffing Thanksgiving Day Run from any and all liability arising from illness, injuries, damages and even death I may suffer as a result of my participating in this event. I grant permission for all of the foregoing to use any photographs, motion pictures, videos and recordings of this event for any legitimate purpose. I understand that entry fees are non-refundable. **I understand that dogs, headphones, bikes and rollerblades are not permitted on the event course. I have read and agree to abide by the conditions of this waiver.**

_____ _____
Participant Signature Date

_____ _____
Parent or Legal Guardian if under 18 years old Date