

KZ RUN / WALK FOR MAISY & SHANNON



Sunday, June 19, 2011 – Kitigan Zibi Anishinabeg

LOCATION: KITIGAN ZIBI SCHOOL • 41 Kikinamage Mikan (School Road) KZ, QC

PRINT CLEARLY • USE SEPARATE FORM FOR EACH ENTRANT • ALL INFORMATION IS REQUIRED

GROUP REGISTRATION FORM

GROUP CONTACT NAME _____

FIRST NATION/ SCHOOL /ORGANIZATION _____

STREET ADDRESS _____

CITY _____ PROVINCE _____ POSTAL CODE _____

EMAIL _____

DAYTIME PHONE _____ EVENING PHONE _____

REGISTRATION FEES

**ALL FEES ARE 100%
NON REFUNDABLE**



PLEASE MAKE CHEQUE PAYABLE TO **FIND MAISY AND SHANNON**

**EARLY BIRD REGISTRATION FEES
MUST BE RECEIVED BEFORE *MAY 1, 2011***

2K \$10
5K \$20
10K \$30

**GENERAL REGISTRATION FEES
*MAY 2 – JUNE 17, 2011***

2K \$20
5K \$30
10K \$40

CHILDREN & YOUTH 17 & UNDER ARE ALWAYS SUBJECT TO EARLY BIRD REGISTRATION FEES.

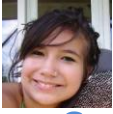
Please be advised that it is the responsibility of the group contact to obtain the legal guardian’s permission for any minors they wish to register to participate in the KZ RUN/WALK FOR MAISY AND SHANNON.

PLEASE READ CAREFULLY AND SIGN BELOW BEFORE RETURNING THIS ENTRY FORM, TO CONFIRM YOUR ACCEPTANCE OF THESE EVENT TERMS: I UNDERSTAND THAT OUR GROUP ENTRY FEE IS NON REFUNDABLE. In consideration of the acceptance of this entry form for this group (or the individual being registered that I have obtained permission from their legal guardian for), I hereby waive, release and forever discharge all rights / claims for damages which we may have now against the KZ Run/Walk for Maisy and Shannon and all participating in and returning from said athletic event. I authorize the KZ Run/Walk for Maisy and Shannon to have and use photographs of our group as may be needed for records or public relations projects. I have read the entry information provided and certify our compliance by my signature below. If participant is under 18 years of age, I certify by my signature I have obtained permission from their legal guardian that the minor has permission to participate, is in good physical condition and that officials may authorize emergency medical treatment in the event of an injury or illness.

GROUP CONTACT SIGNATURE _____

DATE _____

Please return registration form with payment in person to Kitigan Zibi Band Office or by mail post marked no later than June 10, 2011 to Find Maisy and Shannon 384 Queen Mary Street, Ottawa, ON K1K 1W7. If you have any questions regarding registration please contact Penny at penny@findmaisyyandshannon.com or 613.204.1476



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#	FIRST NAME	LAST NAME	MALE / FEMALE	DATE OF BIRTH (DD/MM/YY)	AGE ON JUNE 19, 2011	EVENT – 2K, 5K or 10K (pick 1 only)	T-SHIRT SIZE YOUTH: S, M, L ADULT: S, M, L, XL, XXL
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

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