



**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 15, 2008.***

## Baltimore Women's Classic 5K Race Registration Form -Sunday, June 22, 2008-

Event (circle one)				5K		Kids Fun Run (Co-ed 8 and under)		
Entry Fee (circle appropriate, enclose check)				\$25	\$30 (if postmarked after June 4)	\$10	\$15 (if postmarked after June 4)	
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, Barnett-Searing Cancer Foundation, 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