



Ford 5K Race Senior Entry Form 2017

Promoted by Bryansford GAC

Race Number _____ (Official use only)

Full Name (Print) _____

Address _____

Phone No _____ Date of Birth _____

Club _____

Next of Kin _____ Telephone Number _____

Email _____

Category (Tick below as appropriate)

Male Junior ___ Open ___ V35 ___ V40 ___ V45 ___ V50 ___ V55 ___ V60 ___

Female Junior ___ Open ___ LV35 ___ LV40 ___ LV45 ___ LV50 ___ LV55 ___ LV60 ___

I understand that this race is held in accordance with both the rules and safety requirements of the NI Athletics. I confirm that I am aware of the organiser's information and requirements in connection with this race. I accept the hazards involved in road running and acknowledge that I am entering and running this race at my own risk. Other than the organiser's liability for causing death or personal injury by negligence, I confirm that I understand that the organiser accepts no liability to me for any loss or damage of any nature to myself or my property arising out of my participation in this race series. I understand that entry details may be stored on a computer. I agree for photographs and videos to be taken and published to promote the sport and future events.

Signed _____ Date _____