



CAPE COD ROADRUNNERS

****Participants are urged to pre-register but post entrants are welcome prior to 10:00 A.M. race day.****

Make checks payable to: BOURNE COMMUNITY BOATING

Mail to: PO Box 3157 Bourne MA 02532

NAME _____ **AGE** _____ **M** ___ **F** ___

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE: _____

EMAIL ADDRESS _____

In consideration of this being accepted, I hereby for myself, heirs, executors and administrators, waive and release any and all right and claim damages I may have against the Cape Cod Road Runners, Weary Travelers Club, Town of Bourne, Bourne Community Boating, or their agents, representatives, successors and assigns for any and all injuries suffered by me at said event or while traveling to or returning therefrom.

SIGNATURE _____ **(Parent, if Applicant is a minor)**