



THE 31ST ANNUAL LITTLE CITY RUN/WALK
SATURDAY, AUGUST 25, 2012,
VERGENNES, VT

VERGENNES DAY RACE

LITTLE CITY
AUGUST 25, 2012

VERGENNES, VT

★ 5K RUN/WALK ★ 10K RUN ★



TO REGISTER:

- > Online: save time, money, and paper! Register online at www.runvermont.org/littlecity
> Use the form below to register via paper or on race day. (Please note: paper and race day registration is \$5 more than online registration.)
> Deadline: Thursday, August 23, 2012 (Register online or ensure your form is received by Thursday, August 23 or brought to the race-day registration table on race morning.)
> Fees: ONLINE: \$20/\$10 ages 18 & under (no shirt), \$30/\$20 ages 18 & under (with tech shirt)
PAPER/RACE DAY: \$25/\$10 ages 18 & under (no shirt), \$35/\$20 ages 18 & under (with tech shirt)

REGISTRATION FORM

NAME:

EMAIL:

We will not sell or rent your email address.

ADDRESS (include City, State & Zip):

PHONE:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT PHONE NUMBER:

EVENT: [] 5K WALK [] 5K RUN [] 10K RUN

RACE DAY AGE: GENDER: [] MALE [] FEMALE:

SHIRT SIZE (unisex tech shirt): [] YOUTH MEDIUM [] YOUTH LARGE [] ADULT SMALL
[] ADULT MEDIUM [] ADULT LARGE [] ADULT XL [] ADULT 2XL

Registration without shirt (\$25) = \$
Registration without shirt (18 & under, \$10) = \$
Registration with shirt (\$35) = \$
Registration with shirt (18 & under, \$20) = \$
TOTAL AMOUNT ENCLOSED:

Paper forms must be RECEIVED by Thursday, August 23, 2012 at 5:00pm OR brought to the Race Day Registration table on the morning of the race. Mail your form to: RunVermont, Suite 304, Burlington VT 05401. Make check payable to: The City of Vergennes. RACE WILL TAKE PLACE RAIN OR SHINE! FEES ARE NON-REFUNDABLE/TRANSFERRABLE.

WAIVER I hereby state this request to participate in the Little City 5k, 10k race, or 5k walk is solely done at my request. I understand the risk of physical injury is inherent while participating in sport and recreation activities. I hereby release the City of Vergennes, Town of Waltham, RunVermont and its employees, agents and volunteers from any and all liability due to personal injury or any health issue that I and/or my children may experience in connection with these activities. I hereby consent to any medical procedures deemed advisable for myself or my child in the event that I am not conscious or cannot be reached. I hereby consent to the use of my child's or my name, photo, or video in any promotions or presentations. Email addresses will not be sold or released to outside vendors. I understand that the City does not provide accident or hospitalization insurance for participants. NOTE: All participants are advised to have adequate personal coverage. Please consider participants own health, experience and tolerance for risk before participating in this event.

SIGNATURE (parent or legal guardian if participant is under 18)

DATE