

ENTRY FORM # _____

Bib Number

OASIS SHAUGHNESSY 8K

27 May 2018

BIRTHDATE ____ / ____ / ____ Age _____ M F
month day year

First Name _____

Last Name _____

Address _____

City _____ Postal Code _____

Province/State _____ Country _____

Telephone _____

Email _____

BC Athletics Number ** _____

Mail Entry: (Postmarked by May 18, 2018)

Mail To: LIONS GATE ROAD RUNNERS,
P.O. Box 74576 KITSILANO RPO, Vancouver BC, V6K 4P4

ENTRY FEE: (Non-refundable)

Run only*.....+\$30 \$ 30

Juniors (19 & under) deduct \$3-\$3 \$ _____

BC Athletics members deduct \$3**-\$3 \$ _____

Late Entries (May 21 to May 27) add+\$5 \$ _____

Cash Cheque **TOTAL** \$

(Cheques Payable to: Lions Gate Road Runners)

* Race entry includes a Day of event BC Athletics membership.
** Only BC ATHLETE members are eligible for the \$3 deduction
BCA Associate and Training members are not eligible for deduction

WAIVER

In consideration of accepting this entry I hereby for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may sustain against this event, organizers of the race, the City of Vancouver, BC Athletics, Oasis, Running Room, Kerrisdale Pharmacy, Kerrisdale Business Association, the Leukemia & Lymphoma Society of Canada and any of their agents, representatives, successors and assigns, including the race sponsors for all and any injuries that I may sustain during the course of the event.

Signature of Athlete **Date**
(PARENT OR LEGAL GUARDIAN IF ATHLETE IS UNDER 19 YEARS OF AGE)

PRIVACY
To respect the privacy of our participants, information given on this form will be used for internal race purposes only and will not be forwarded to anyone else.