



**Mail-In Registration Form**  
Playworks Arizona  
2002 E Clarendon Ave  
Phoenix, AZ 85016  
ATTN: Madolyn Whitmer

**Name:** \_\_\_\_\_ **Circle One:** 5K  
10K  
Kids Mascot Dash

**Age on Race Day:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Circle One:** Male Female

**Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Age Group:** Circle one <18 18-25 26-30 31-35 36-40 41-45 46-50 51-55 56-60 61-65 66-70 70+

**Shirt Size | Circle One:** Adult Small | Adult Medium  
Adult Large | Adult XL | Adult XX  
Youth Small | Youth Medium  
Youth Large | Youth XL

\*shirt not included with Mascot Dash but is available for purchase on race day.

**Emergency Contact:** \_\_\_\_\_

**Emergency Phone:** \_\_\_\_\_

**Disclaimer:**

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against the City of Scottsdale, Scottsdale Airport, Mission Driven Events and Playworks (including the respective affiliates, employees, agents, officers, directors, and shareholders of such officials and sponsors), coordinating groups, and any individuals associated with the events, their representatives, successors and assigns, and will hold them harmless for any and all injuries or illness suffered in connection with said event. I have been warned I must be in good health to participate in this event. In filling out this form, I acknowledge that I am an amateur in such events. I also give permission for free use of my name and picture in any broadcast, telecast or print media account of this event. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions. This entry is invalid unless signed by participant. If entrant is under 18 years of age, parent or legal guardian must sign below.

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Amount Enclosed:** \_\_\_\_\_

**Instructions:**

1. Complete entire form
2. Sign form
3. Enclose payment, with check made payable to Playworks
4. Mail to address listed at top of form

**\*\*\*Payment must be received 7 days prior to the event date**