

## Registration Form

Participant Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Email \_\_\_\_\_  
Phone \_\_\_\_\_ Age (if under 18) \_\_\_\_  
Gender (circle one) Male Female  
T-Shirt Size (circle one)  
Youth: Small Medium Large Extra Large  
Adult: Small Medium Large Extra Large

Participant Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Email \_\_\_\_\_  
Phone \_\_\_\_\_ Age (if under 18) \_\_\_\_  
Gender (circle one) Male Female  
T-Shirt Size (circle one)  
Youth: Small Medium Large Extra Large  
Adult: Small Medium Large Extra Large

*I am participating in this event of my own volition and I am releasing Girls Scouts Heart of New Jersey, Washington Township, Girl Scouts Service Unit 90, all event sponsors & their representatives of any responsibility or liability in the event of illness, injury or accident. I grant permission for any of the above mentioned to use my photographs, video recordings or any other record of this event for any legitimate purpose.*

Mail this form & payment to: Girl Scout Service Unit 90 5K Run/Walk  
c/o Jen Price, 10 Pohatcong Terrace, Washington, NJ 07882  
**Make checks payable to GSHNJ SU 90.**  
**Registration closes March 21st.**

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Phone \_\_\_\_\_ Age (if under 18) \_\_\_\_  
Gender (circle one) Male Female  
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Gender (circle one) Male Female  
T-Shirt Size (circle one)  
Youth: Small Medium Large Extra Large  
Adult: Small Medium Large Extra Large

**Anyone under 18 years of age must have a parent or guardian signature and must have a responsible adult accompany them at all times.**

Participant Signature \_\_\_\_\_  
Date \_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date \_\_\_\_\_