WOMEN ON THE move
training series

Online registration is available at atlantatrackclub.org

LAST NAME

FIRST NAME M.I.

BIRTH DATE (MM-DD-YY)

Are you an Atlanta Track Club Member?
❑ Yes ❑ No

REGISTRATION: $65 through 11:59 p.m. on December 28, 2011. $75 December 29 through 11:59 p.m. on February 11, 2012. Mail to Atlanta Track Club, P.O. Box 12109, Atlanta, GA 30355. Registration fee includes entry into the 2012 Atlanta Women's 5K.

Participants must be at least 16 years of age at the start of the program.

ADDRESS (NUMBER AND STREET) C/0. APT. NUMBER, P.O. BOX, ROUTE NO.

CITY STATE

U.S. ZIP CODE — AREA CODE DAYTIME PHONE — —

E-MAIL ADDRESS

RACE DAY EMERGENCY CONTACT NAME

RACE DAY EMERGENCY CONTACT PHONE – –

SELECT TRAINING LOCATION:

❑ **Whole Foods** - Buckhead (Tuesdays at 6:30 p.m., beginning on 1/31/12)
❑ **Phidippides** - Sandy Springs (Wednesdays at 9:30 a.m., beginning 2/1/12)
❑ **West Stride** - Buckhead/Vinings (Saturdays at 8:30 a.m., beginning on 2/4/12)
❑ **Phidippides** - Ansley Mall - Midtown (Saturdays at 8:30 a.m., beginning 2/4/12)
❑ **Road Runner Sports** - Chastain Park/Buckhead (Saturdays at 8:30 a.m., beginning 2/4/12)

Long-Sleeve Performance Shirt

XS S M L XL XXL

: : ESTIMATED 5K FINISH TIME (H:MM:SS)

RELEASE FORM: I know that running and participating in training programs are potentially hazardous activities. I should not run unless I am medically able, with consent from my physician, to properly prepare and participate in the Atlanta Track Club's Women on the Move Training Series and the Atlanta Women's 5K. I assume all risks associated with running in the training runs in preparation for the Women on the Move Training Series and the Atlanta Women's 5K, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry to the Women on the Move Training Series, I, for myself and anyone entitled to act on my behalf, waive and release the Atlanta Track Club, West Stride, Phidippides, Road Runner Sports, Northside Hospital, Athena Water, Whole Foods all city, county and state governments, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this training program and race. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this training program and event for any legitimate purpose. I also grant permission to the Atlanta Track Club to contact me by email for training series and race related communications. I understand that the training program and race entry fees paid by or for me are nonrefundable. The no refund policy applies to any cancellation of the training program or race for weather or other circumstances as deemed appropriate by the official race director.

DATE SIGNATURE (required)

PARENT'S SIGNATURE IF UNDER 18 YEARS
(IN ADDITION TO CHILD'S SIGNATURE)

RACE DAY EMERGENCY CONTACT: NAME PHONE NUMBER

ATHENA NORTHSIDE HOSPITAL PHIDIPPIDES West Stride Run for fun. Run for life. WHOLE FOODS MARKET ATLANTA TRACK CLUB