

# CRIM WHEELER APPLICATION — RACE DAY AUGUST 28, 2010

Please fill out entire application.

One entry per person and event – May be copied

LAST NAME										M	M	D	D	Y	Y
FIRST NAME										MI		GENDER M or F		AGE ON RACE DAY	
ADDRESS (NUMBER AND STREET) C/O, APT, NUMBER, P.O. BOX, ROUTE NO.															
CITY										STATE					
U.S. ZIP CODE OR POSTAL CODE															
COUNTRY (IF OTHER THAN US)															
AREA CODE				DAYTIME PHONE											

e-mail address \_\_\_\_\_

(Please Print Legibly)

**T-Shirt Size** (circle one)

S M LG XL XXL  
(Add \$2)

**Check One:**

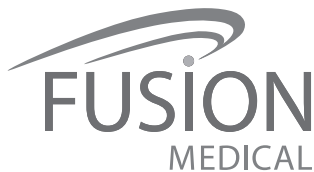
Para   
 Quad   
 Hand Cycle

Register before August 1st to receive free personalized bib.

EVENT	Before 7/15	7/16- 8/25	8/26- 8/27
Crim 10 Mile Wheeler	\$30	\$35	\$40

## NO RACE DAY REGISTRATION

CRIM 10 MILE WHEELER DIVISION IS PROUDLY  
SPONSORED BY FUSION MEDICAL



**FOR MORE WHEELER INFORMATION**  
 VISIT [WWW.CRIM.ORG/RACE](http://WWW.CRIM.ORG/RACE)  
 VISIT FUSION MEDICAL BOOTH AT THE CRIM EXPO  
 TO PICK UP WHEELER PACKET AND BIB

### LIABILITY AND PUBLICATION RELEASE. APPLICATION WILL NOT BE PROCESSED WITHOUT SIGNATURE.

Please accept my entry in the 2010 Crim Festival of Races. I hereby state I have conditioned myself to participate in the event I have chosen. I, for myself, my executors, administrators and assignees, do hereby release and discharge the Crim Fitness Foundation, its officials, its sponsors and volunteers from damages, injuries, or expenses occasioned by my participation in the Crim Festival of Races. I also authorize Crim Fitness Foundation officials to utilize my photographs and video tape of my participation in the Crim Festival of Races for any and all purposes. By signing my name below, I hereby certify that I have read all the terms and conditions of this release and do intend to be legally bound thereby.

X \_\_\_\_\_  
 Applicant's Signature (Parent if athlete under 18) Date

**MUST BE SIGNED!**

How many 10 mile Crims have you participated in? \_\_\_\_\_

Make Check payable to:

Crim Fitness Foundation  
 P.O. Box 981 Flint, MI 48501

FAX entries to (810) 235-5311

Mastercard  Visa

Account # \_\_\_\_\_

Name as appears on credit card \_\_\_\_\_

Signature \_\_\_\_\_

Exp. Date \_\_\_\_\_

A \$2 service fee will be added for FAX applications.  
 NO FAXED ENTRIES accepted after  
 11:59 pm, Thursday, August 26, 2010.

### ORDER BLANK AMOUNT ENCLOSED

- Event Entry Fee** \$ \_\_\_\_\_
- Crim Pasta Party Tickets**  
 Qty \_\_\_\_\_ x \$10 (Adults) \$ \_\_\_\_\_  
 Qty \_\_\_\_\_ x \$5 (Kids) \$ \_\_\_\_\_
- Size XXL T-Shirt** (additional \$2.00) \$ \_\_\_\_\_
- Crim Upgrade – Brooks Technical Shirt** (\$15.00)  
 (Participants ordering upgrades will also receive race T-shirt. Indicate sizing for both.)  
 XS S M L XL XXL (circle size)  
 (additional \$2.00 for XXL)
- Flint Journal Race Results** (\$6.00) \$ \_\_\_\_\_
- Charitable Contribution**
  - Crim Youth Development Program \$ \_\_\_\_\_
  - Area XIII Special Olympics Michigan \$ \_\_\_\_\_
- Fax Fee** (\$2.00 Charge Orders only) \$ \_\_\_\_\_
- TOTAL DUE**  
 US Funds Only — No Refunds  
 — Not Transferable \$ \_\_\_\_\_