

**Do-Run Run
“Strip and Go Run”
Registration Form**

PRSSA Do-Run Run
326 Lang Hall
University of Northern Iowa
Cedar Falls, IA 50613

This year, PRSSA’s Do-Run Run will donate to St. Vincent’s De Paul Society. There will be five checkpoints during the 5k run/walk that participates will be able to strip a piece of clothing to donate. The race will begin at Gateway Park in Cedar Falls.

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Age: _____ Email: _____

Entry Fee (Check One):

T-Shirt Size (Please Circle One):

Before April 14: \$20 _____

Adult: S M L XL

Day of: \$25 _____

Total Enclosed (Non-Refundable): _____

(Check or Cash Only)

Waiver of Consent and Liability:

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, executors, administration, waive any and all rights and claims for damages I may have against individuals associated with UNI PRSSA, Cystic Fibrosis Foundation, Do-Run Run, all sponsors, officials, representatives, successors, and assigns, for all injuries suffered by me during, because of, or in travels to or from said event. I attest and verify that I have full knowledge of the risks involved in this event and am physically fit and sufficiently trained to participate.

Signature: _____

If under 18, parent/guardian must sign and a secondary emergency contact must be listed.

