

**To Register for the Waterford Landmark 10K Cross Country Run-Hike-Walk:**

**\*First**

**Name:** \_\_\_\_\_

**\*Last Name:** \_\_\_\_\_

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

**\*City:** \_\_\_\_\_

**\*State:** \_\_\_\_\_

**\*Zip Code:** \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**\*Run Hike Walk (circle your event)**

**\*T-shirt S M L XL (circle one)**

**Print this page and mail to the address listed.**

**\*Required Information DO NOT MAIL AFTER 4/1/08**

**The 4th Waterford Landmark 10K  
Cross Country Run-Hike-Walk**

**Mail this form along with your  
check made payable to:**

**Foundation for Charitable  
Funding, Inc.  
PO Box 315  
Waterford, VA 20197**

**Important Release Information**

**MUST be signed by participant or Parent or Guardian if participant is under 18.**

**In consideration of the application being accepted, I, hereby, for myself, my heirs, and executors waive, release and forever discharge any and all rights and claims for damages which I have hereafter accrue to me against the organizers and sponsors of the Waterford Landmark 10K Cross Country Run-Hike-Walk, Foundation for Charitable Funding, Inc. or other sponsors, their representatives, successors and assigns and verify that I am physically fit and have trained sufficiently for the competition of this Run. Further, I hereby grant full permission to any and all of the foregoing to use my name, photograph, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose, without compensation or remuneration.**

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

**Entry MUST be signed by Runner (Parent or Legal Guardian if Runner is under 18).**

**NOTE: NO REFUNDS OR CONFIRMATIONS WILL BE SENT**

**This form may be photocopied. One entry per form.**