



Fellowship of Christian Firefighters International

Lake Cumberland Area Fire and EMS Chapter

5k Run/Walk Registration Form

Last Name _____ First Name _____ Age _____
(As of 7/18/09)

Address _____

City _____ State _____ Zip-Code _____

Email _____

Phone (____) _____ Male _____ Female _____ 5K _____ Kids _____

T-Shirt size: Small _____ Medium _____ Large _____ X-Large _____
Kids Medium _____ Large _____

Release: I hereby release the Fellowship of Christian Firefighters International, the Lake Cumberland Area Fire and EMS Chapter, the Monticello/Wayne County Memorial Park, their respective officers and board members, the race committee and volunteers from any and all responsibility in case of accident or injury during my participation in this event. Please sign to denote your acceptance of the above.

Participant Signature

Date

Parent/Guardian Signature (If participant is under 18)

Date

Mail completed form and payment to: LCAFCF
5K Run & Walk
3133 W. Hwy 92
Monticello, KY 42633

Entry Fee: \$15 (All ages) 5k Pre 7/15 Make check payable to:
\$20 (All ages) 5k 7/15 to Race **LCAFCF**

Race Info: 606-278-2539 or www.lakecumberlandfcf.com