

**Annual Oak Bluffs Memorial Day
5 Kilometer Road Race and One Mile Family Fun Run**

In consideration of this entry being accepted, I, for my heirs, executors, administrators, waive and release any and all claims for personal damages I may have against the organizers, the Town of Oak Bluffs and sponsors of this race and I attest and verify that I am physically fit and have sufficiently trained for this event.

Signature _____

Signature of parent/guardian (if under18) _____

T-Shirt size S___ M___ L___ XL___

Event: 1 mile Fun Run___ 5K Walk___ 5K Race___

___ **Please x if this is a new mailing
address or your first Oak Bluffs Race.**

LAST NAME

FIRST NAME

MAIL ADDRESS

ZIPCODE

CITY

STATE

AGE

MALE FEMALE

Please bring the signed entry form to the race registration or mail to Hospice of Martha's Vineyard, Box 2549, Oak Bluffs, MA 02557.

Pre-registration by 5/29 is \$15

Day of registration 5/30 is \$20

Free T-shirt with pre-registration only

Make check payable to HMV