



Individual Entry Form

25th Annual Jingle Bell Run/ Walk for The Arthritis Foundation
Sunday, November 11th Heartland Community College
Fitness and Recreation Center

Registration Fees: \$25 until July 31st

\$30 until October 31st

\$35 November 1 and after

***Make a \$10 donation to receive a goodie bag**

MAKE CHECKS PAYABLE TO THE ARTHRITIS FOUNDATION

Please write legibly so all of your information is entered correctly- Thanks!

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: (please use a correct e-mail you frequently check- we will be sending information through e-mail)

Birth Day: ____/____/____

Gender: _____

I hereby certify the following: (1) I am physically fit and have received medical clearance to participate in Jingle Bell Run and training, (2) In consideration for my application to participate in Jingle Bell Run event and training being accepted, I, on behalf of myself, my heirs and assigns, and my estate, hereby waive and forever discharge the sponsors, organizers, affiliates, coaches, as well as their agents and employees from any and all claims that may accrue as the result of my participation, and (3) I hereby grant the Arthritis Foundation specific permission to reproduce, publish, circulate, copyright or otherwise use any and all photographs and / or videotape of me and / or my family, taken at the Jingle Bell Run, for use by the Arthritis Foundation.

Date: _____ Signature: _____

(If under 18- a guardian's signature is needed)

- 5K competitive run/ walk (you will receive your race time)
- 5K non-competitive run/ walk (you will not receive your race time)
- One mile non-competitive walk

T-SHIRT: YS YM YL S M L XL XXL XXXL (Add \$2.50 to registration fee for XXL and XXXL shirts)

Send completed registration form and check made payable to "THE ARTHRITIS FOUNDATION" to our accounting department for secure processing at:

Arthritis Foundation- Heartland Region, Greater Illinois
PO Box 790379
St. Louis, MO 63179-0379