



****Participants are urged to pre-register but post entrants are welcome prior to 10:00 A.M. race day.****

Make checks payable to: **BOURNE CONSERVATION TRUST** or **B.C.T.**

Mail to: **Steve Ballentine P.O. Box 457, Cataumet Ma. 02534**

NAME _____ AGE _____ M _____ F _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE: _____

EMAIL ADDRESS _____

In consideration of this being accepted, I hereby for myself, heirs, executors and administrators, waive and release any and all right and claim damages I may have against the Cape Cod Road Runners, Weary Travelers Club, Town of Bourne, or their agents, representatives, successors and assigns for any and all injuries suffered by me at said event or while traveling to or returning therefrom.

SIGNATURE _____ (Parent, if Applicant is a minor)