

May the Fourth Be With You

Virtual 4k

June 4 - July 4, 2020

www.MayThe4k.com

4k - \$25

Name: _____ Phone: _____

Address: _____

City: _____ State _____ Zip _____

E-mail: _____

Date of Birth: ___/___/___ Age on Event Day: _____ Sex: M F

Emergency Contact (Name & Phone) _____

T-shirt Size: (circle one) YS YM YL S M L XL XXL XXXL

Checks Payable to: WCQR

Mail this form to: May the 4th Be With You
3101 Browns Mill Road, Ste. 6-182
Johnson City, TN 37604

In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all claims for personal injury or property damage, of whatever form and nature, I may have against the The Goose Chase, its affiliates and/or subsidiaries, WCQR, co-sponsoring organizations, and all other persons, acting on behalf of the foregoing organizations, stemming from or arising as a result of my participation in any of the events of the 2020 May the Fourth Be With You 4k. I attest and verify that I am physically fit and sufficiently trained to participate in any of the events that I enter. I also give my permission for the free use of my name and picture in any newspaper write up, "broadcast", "telecast", or other written account of this event.

Participant/Guardian Signature & Date: _____

***Signature of parent/guardian required if participant is under age 18.**