

**Henry County YMCA & Healthy Communities of Henry County, Inc.**  
**Treading for Trails 5K Run/Walk Registration Form**  
**August 29, 2009 9:00 am**  
**South Henry Regional Wastewater District**  
**301 South Williams Lewisville, IN 47352**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Age \_\_\_\_\_ Sex \_\_\_\_\_ Run or Walk? \_\_\_\_\_

T-Shirt Size: (please circle adult size) Sm Med Lrg XL XXL XXXL

Please circle your divisions: 0-12 13-19 20-29 30-39 40-49 50-59 60+  
(divisions subject to change )

**Pre-registration deadline is August 15, 2009**

Pre-registration with shirt **\$15\*** Race day registration with shirt **\$20\***

*Shirts are short sleeved!*

Awards will be provided to the top 3 winners in each male/female 5K running division.

I hereby certify that I am adequately fit to run in this race. In consideration of the acceptance of this entry, I, the undersigned, for myself, my personal representative, beneficiaries, and heirs, knowingly waive, release, and discharge any and all rights and claims which I have or may have hereafter accrue to me or my estate against the Henry County YMCA, Healthy Communities of Henry County, Inc., and/or any other sponsors, organizers and volunteers and assigns for any and all injuries or death suffered by me in this event. I will also allow my picture and name to be used in publications as a result of this race.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of parent or guardian if  
applicant is under 18

\_\_\_\_\_  
Name & cell number of parent

Please mail completed form to:

Doug Mathis, Henry Co. Health Department  
1201 Race Street, Suite 208  
New Castle, IN 47362

Call 765-521-7060 for questions or interest in sponsorship

\* Any amount over the registration fee is appreciated, will help fund HCHC and YMCA activities and projects, and should qualify as a charitable contribution for income tax purposes.