Fort Detrick • 19th Annual • Armed Forces Day 10K Run

The Fort Detrick 19th Annual Armed Forces Day 10K Run will be held on 17 May 2008, with a start time of 0730. The run starts and finishes at the Odom Fitness Center, Building 1507. For more information, call 301-619-2498.

Awards will be presented to the top three (3) finishers in each age group: Under 15, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60 and older. Trophies will be presented to the top male and female overall winners.

- ENTRIES: Race Day Registration 0600 0645. Entry fee is \$20.00 per runner.
- RACE PACKET: Race packets can be picked up at the Odom Fitness Center, Building 1507, on Saturday, 17 May 2008, from 0600 0700.
- IDENTIFICATION: Runners will also be required to show/display a photo ID upon entry to Fort Detrick.
- NOTE: NO RADIO HEADPHONES WILL BE WORN BY RUNNERS.
- MAKE CHECK PAYABLE TO: IMWRF, FORT DETRICK

MAIL TO: SPORTS DIRECTOR ATTN: 10K Run

BLDG 1507, FORT DETRICK FREDERICK, MD 21702-5000



The purpose of soliciting the following information is to organize participants and catalog their releases of liability. Any information you provide is disclosable to members of the Department of Defense who have a need for the information in the performance of duties. There will be no adverse effect on you for not furnishing this information other than you will not be permitted to participate in this run.

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Name			Sex	: M	F	
	First	Last				
Date of Birth_	Age					
Address						
	Street	City	State	Zip		
Telephone Nur	nber ()		T-shirt Size	L	XI	
Signature of R	unner		Date			
	arent/Guardian ler 18 years of age)					_

RELEASE AND HOLD HARMLESS AGREEMENT (Morale Support Activities)

For use of this form, see AR 215-1; the proponent agency is TAGO

In consideration for being allowed to participate inFort Detr	ick Armed Forces Day 10 K I hereby release the						
Fort Detrick Morale Suppo	ort Activities (MSA) and the United States Government						
from any liabilities or claims arising from my own participation. I agree that I will never prosecute or in any way aid in prosecuting any demand, claim, or suit against the United States Government* for any loss, damage, or injury to my person or property that may occur from any cause whatsoever as a result of taking part in this activity.							
I also understand and agree that I may be held liable for any damage or loss to the United States Government that is caused by my gross negligence, willful misconduct, or fraud.							
SIGNATURE OF CONTESTANT	DATE						
FOR MINO	R CHILD						
I,, parent/legal gutaking part in this Morale Support Activity. I will abide by the a	uardian of the above-said minor child, consent to his or her bove.						
SIGNATURE OF PARENT / GUARDIAN	DATE						
*United States Government, as used here, includes Morale Support Activities Morale Support Activities, acting officially or otherwise.	and any officer, agency, or employee of the United States Government or						

DA FORM 5293-R, FEB 84

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