



Dash for Lash- Glow Run 2016

Come and celebrate Madison's 1 year post transplant birthday

GLOW 5K Run/Walk Registration Form

Saturday July 16th, 2016

Registration begins at 7:00 p.m. and Race begins at 8:00 p.m.



Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Sex: M or F Age on race day: _____

Race Type (circle all that apply): Run Walk

Shirt Size (circle one): Adult: S M L XL 2XL

Youth Size: S M L XL

Entry Fee: \$30.00 (if not turned in by July 1st a shirt will not be provided)

Make checks payable to: Madison Lash Benefit Fund

Mail to: Rachel Thompson; 8090 King Rd Kinmundy, IL 62854

* Registration form and entry fee are due by July 1st for a t-shirt. You may register the day of the race.

For more information, please contact Mikayla Stanfield at Mikayla_stanfield@hotmail.com. All proceeds will go to the Lash family to help with medical expenses to find out more on Madison's story visit thelashfamily.com

Waiver: By signing below, I do hereby release and discharge from liability the town of Vandalia. Mikayla Stanfield, Ryan and Lindsay Lash, Rachel Thompson, Vandalia Park District, organizers, event sponsors, supervisors of the "Dash for Lash Walk/Run" and their representatives, successors and assigns for any and all causes of action, claims, and injuries suffered by me in this event, however incurred. I attest and verify that I have sufficiently trained for the completion of this event. As a parent or guardian of the applicant (if applicant under the age of 18), I hereby consent to the participation of the applicant in the race under the above mentioned conditions.

Signature: _____ Date: _____

Parent/Guardian

Date: _____