



The College of The Bahamas  
SPORTS & WELLNESS INSTITUTE  
**APPLICATION FORM**  
FUN RUN/WALK - Saturday May 23rd, 2009



Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Age \_\_\_\_\_ MALE [ ] FEMALE [ ]

Emergency Contact Name \_\_\_\_\_ Telephone \_\_\_\_\_

**Category:**

**(A) RUNNER**

15 and under [ ] 16-25 [ ] 26-35 [ ] 36-50 [ ] 51-60 [ ] 60+ [ ]

**(B) WALKER**

15 and under [ ] 16-25 [ ] 26-35 [ ] 36-50 [ ] 51-60 [ ] 60+ [ ]

**T-Shirt Size:** Child [ ] M [ ] L [ ] Adult [ ] S [ ] M [ ] L [ ] XL [ ] XXL [ ] XXXL

Entry Fee: **\$10.00** (S-XL); **\$12.00** (XXL or larger)  
Deliver to: Wellness Centre, Oakes Field Campus  
Telephone: 302-4349

**FUN RUN/WALK START TIME: 6:00a.m.**

**ROUTE:** Start at the Portia Smith Building on Poinciana Drive, travel east to Wulff Road, turn left onto Collins Avenue onto Shirley Street; head west on Shirley, turn right on Cumberland Street, turn left onto West Bay Street onto Nassau Street onto Poinciana Drive and back to the Portia Smith Building.

**DISCLAIMER:** I declare and affirm that I am physically fit to participate in The College of The Bahamas' Sports & Wellness Institute Fun Run/Walk and have not been advised otherwise by a medical practitioner. The undersigned accepts and understands that The College of The Bahamas or any entity of The College of The Bahamas namely, The Sports & Wellness Institute accepts no responsibility for any injuries caused including death that may arise while participating in the Fun Run/Walk. The participant on behalf of the participant's heirs and executors waives the right to sue and release all losses and damages that may arise to the participant. I, the participant assume and accept any risk that may be involved in the Fun Run/Walk.

\_\_\_\_\_  
**Signature/Parent (If under the age of 18 years old)**