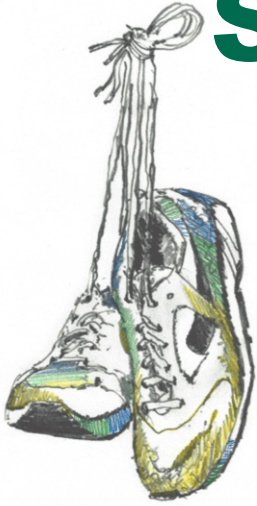


3rd Annual

STEPS TO RECOVERY

5K Run/Walk



BILLY T. CATTAN
RECOVERY OUTREACH CENTER
Treating Addiction. Repairing Lives.

DATE & TIME
September 10, 2016 at 8am

LOCATION
Riverside Park, Victoria, TX

REGISTRATION FEES & DEADLINES

Early Registration
August 1st - 15th - \$25

Regular Registration
August 16th - September 8th - \$35

Onsite Registration
September 10th - \$45

Student Registration
Ages 18-22 - \$20

REGISTRATION FORM

T-Shirts to everyone who registers before September 2, 2016

Wellness Bags to the first 150 people who register

Electronic Timing & Scoring provided by IAAP Timing Company

Trophies presented to the Top 3 Participants | Raffles and Door Prizes

No dogs, roller blades, skates, skateboards, bikes, or scooters are permitted on the race course

ALL PROCEEDS BENEFIT THE BILLY T. CATTAN RECOVERY OUTREACH CENTER

PLEASE COMPLETE THIS FORM AND RETURN BY SEPTEMBER 10, 2016

First Name _____ Last Name _____

Female Male Student

Gender _____ Birth Date _____ Age on Race Day _____

Phone _____ E-mail _____

Street Address _____

City _____ State _____ Zip Code _____

T-Shirt Size (Adult Sizes) S M L XL 2XL

Please make checks payable and mail to BTCRO, 1908 N. Laurent St., Suite 120, TX 77901

WAIVER

I hereby declare, assert, and affirm that participation in Steps to Recover 5K Run/Walk is done having voluntarily and knowing assumed ALL RISKS involved in this event. The immediate physical risks and hazards associated with normal, vigorous physical activity included (but not limited to) physical discomfort, fatigue, muscular soreness, falls, pulled or strained muscles, overuse injuries, heat stress, and the rare instance of abnormal responses of the cardio-respiratory system including heart arrhythmia, heart attack, stroke, and sudden death. In consideration of acceptance of this contract allowing my participation in the above stated event and intending to be legally bound thereby, I hereby for myself, my heirs, executors, administrators, and assigns, WAIVE AND RELEASE any and all rights and claims for negligence, injuries, damages, or losses that I may incur against all participating agencies involved in the above stated event, specifically Billy T. Cattan Recovery Outreach Center, their respective employees, agents, representatives, successors, and assigns, for any and all activities connected with the above event.

Print Name _____ Date _____

Signature _____

BTCRO is a 501(c)3 not-for-profit organization. If you have questions about this form or the event, please contact Danielle Alex at (361)576-4673 or email at dalex@btcro.com. For more information on BTCRO and this event, please visit www.btcro.org