



REGISTRATION FORM

www.rip5k.org

SATURDAY, OCTOBER 7TH AT 5PM

Organized by the Friends of Laurel Hill, the Rest In Peace 5K is a unique and challenging run through Laurel Hill East, a National Historic Landmark. Don't let the beautiful scenery fool you; the course is packed with plenty of hills, twists and turns! Compete with other runners as you run past undead course directors and mile markers!

PRESENTED WITH BROWN BROTHERS HARRIMAN

RACE STARTS AT: 3822 RIDGE AVENUE, PHILADELPHIA, PA 19132

MAIL FORMS TO: FRIENDS OF LAUREL HILL, 3822 RIDGE AVENUE, PHILADELPHIA, PA 19132

TO REGISTER ONLINE, VISIT www.rip5k.org

REGISTRATION INFORMATION (*ALL INFORMATION IS REQUIRED)

☐ Kids (\$15.00)
Ages 8-12

☐ Teens (\$25.00)
Ages 13-19

☐ Adults (\$45.00)
Ages 20+

☐ Dog (\$7.00) *Dogs must be registered with a human

Name of Registrant _____

Name of Dog _____

Email _____

Address _____

City, State, and Zip _____

Phone Number _____ Gender ☐ Male ☐ Female ☐ Gender Neutral

Date of Birth (xx/xx/xxxx) _____

Age Division ☐ Kids 8-12 ☐ Teens 13-19 ☐ Adults 20-35 ☐ Masters 36-49 ☐ Grand Master 50+

T-Shirt Size ☐ Youth Small ☐ Youth Medium ☐ Youth Large ☐ Youth XL ☐ 2 X-Large
☐ Small ☐ Medium ☐ Large ☐ X-Large

PAYMENT INFORMATION

☐ Check enclosed (Make payable to Friends of Laurel Hill (*all checks must be received by 9/30/23))

☐ Credit Card (All major credit cards accepted)

Name on Card _____

Card # _____

Expiration Date _____ Security Code # _____

Billing Zip Code _____ Signature _____

I'D LIKE TO ADD A DONATION

TO MY ORDER (optional) \$ _____

TERMS (Check box and sign) ☐ I have read and agree to the terms below _____

****WAIVER**** I, the undersigned, as a participant in the Rest in Peace 5K, waive any and all claims which I and my heirs or assigns may now or hereafter have against the Friends of Laurel Hill and all individuals associated with the organization in a professional capacity, which may indirectly or directly result from my participation in this event. I further warrant and represent that I am in the proper physical condition to participate in the Rest in Peace 5K and am not participating in this event against a physician's advice nor am I taking any medications that would impair my health or ability to participate.

IF THE PARTICIPANT IS UNDER AGE 18: The parent/guardian signing above certifies that their son/daughter has permission to participate in the Rest in Peace 5K. The parent/guardian certifies they have read the foregoing RELEASE AND WAIVER OF LIABILITY AGREEMENT and, by accepting the waiver intentionally and voluntarily, agree to its terms and conditions. The parent/guardian further certifies that their son/daughter is in good physical condition and is able to safely participate in the Rest in Peace 5K.

If I am under 18 years of age, I understand that PARTICIPATION WILL BE DENIED, if the signature of an adult participant or parent/guardian are not provided on a paper waiver by the date of the race.

I also understand that all funds are for charitable contribution and are non-refundable. I understand that in the event I cannot attend the race I may transfer my registration to another person or have my registration fee counted as a tax-deductible donation.

When registering online, my online signature shall substitute for and have the same legal effect as an original form signature.