

ENTRY FORM

PLEASE PRINT:

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: _____

T-Shirt Size (check one):

Adult: Small Medium Large Extra Large
Youth: Medium Large

Age Groups (check one)

<input type="checkbox"/> 12 & under	<input type="checkbox"/> 30-34	<input type="checkbox"/> 55-59
<input type="checkbox"/> 13-15	<input type="checkbox"/> 35-39	<input type="checkbox"/> 60-64
<input type="checkbox"/> 16-19	<input type="checkbox"/> 40-44	<input type="checkbox"/> 65-69
<input type="checkbox"/> 20-24	<input type="checkbox"/> 45-49	<input type="checkbox"/> 70-74
<input type="checkbox"/> 25-29	<input type="checkbox"/> 50-54	<input type="checkbox"/> 75 & Older

Male Female
 5K One-Mile Walk

Entry Fee: \$10

Checks payable to:
Kentucky State Nature Preserves Commission

Mail to:
Short's Goldenrod Festival
801 Schenkel Lane
Frankfort, KY 40601

Questions?

Alice Mandt (502) 573-2886
alice.mandt@ky.gov
www.naturepreserves.ky.gov

PLEASE SIGN WAIVER

PARTICIPANT WAIVER

I, the undersigned participant in the Short's Goldenrod Festival 5K and one-mile walk, do hereby agree for myself, my heirs, executors, and assigns that the Commonwealth of Kentucky, Commerce Cabinet, Department of Parks, Environmental Public and Protection Cabinet, Kentucky State Nature Preserves Commission, and any agents, officers, employees, volunteers, and sponsors, shall be released from any and all claims for personal injury or injury, loss, or damage to personal property suffered or sustained by me in connection with, or arising out of or resulting from, any and all activities associated with the Short's Goldenrod Festival 5K and one mile walk while on or about the premises of the United States, Corps of Engineers, and Commonwealth of Kentucky, Department of Parks, in Robertson County, Blue Licks Battlefield Resort Park Site. I further assume the risk of personal injury, loss, or damage to myself and loss, injury, and damage to my property while on the above premises and while participating in the above activities.

Participant's signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(if athlete is under 18 years of age)



FESTIVAL SPONSORS

