# Frog Legs 5K 2021 Registration Form

Must be postmarked by 8/30/21 for pre-registration

| First Name:  |         |      |       |        |         |        |      |
|--|---------|------|-------|--------|---------|--------|------|
| Last Name:   |         |      |       |        |         |        |      |
| Address:   |         |      |       |        |         |        |      |
| City, State, Zip:  |         |      |       |        |         |        |      |
| E-mail:  |         |      |       |        |         |        |      |
| Date of Birth:   |         |      | Ge    | nde    | r: M    |        | F    |
| Phone:   |         |      |       |        |         |        |      |
| Emergency Contact  | t Name  | e:   |       |        |         |        |      |
| Emergency Contact Phone:                                 |         |      |       |        |         |        |      |
| How did you hear about the race?                         |         |      |       |        |         |        |      |
| ☐ I am not able to run/walk but would like to donate!    |         |      |       |        |         |        |      |
| Payment enclosed:  |         |      |       |        |         |        |      |
| □ \$30 Adult Pre-Registration (13 and over)              |         |      |       |        |         |        |      |
| ☐ \$15 Child Registration (12 and under)                 |         |      |       |        |         |        |      |
| \$12.00 Frog Legs So                                     | ocks    | S/N  | I     | L/X    | L       |        |      |
| T-Shirt Option:  |         |      |       |        |         |        |      |
| Circle T-shirt Size:                                     | Youth   | S    | M     | L      |         |        |      |
| ,  | Adult   | S    | M     | L      | XL      | XXL    | XXXL |
| $\Box$ I have signed the waiver on the back of this form |         |      |       |        |         |        |      |
| Mail navment an  | ıd comp | lete | d rec | ristra | ition f | orm to | the  |

Epilepsy Alliance (address on reverse)

# Sponsored By:













Saturday, September 4, 2021 9:00 am Sawyer Point



895 Central Ave Ste 550 Cincinnati, OH 45202-5757 Phone: (513) 721-2905/ (877) 804-2241 3857 N High St Ste 206 Columbus, OH 43214-3752 Phone: (614) 725-1031

> Website: www.epilepsy-ohio.org E-mail: eao@epilepsy-ohio.org



## Frog Legs 5K



Join WEBN and the Epilepsy Alliance Ohio as we host the 2nd annual Frog Legs 5K. This event adds to the weekend of fun that WEBN delivers every year with the fireworks. You will enjoy a beautiful course along the river as well as great food and drinks after the race. Be sure to purchase a pair of Frog Legs socks to compliment the awesome race shirt!

Register today to guarantee your spot at this event which is sure to become a Cincinnati tradition.

All proceeds from this event benefit the programs and services of the **Epilepsy Alliance Ohio.** 

Top male and female runner and their guest will have a front row view of the fireworks.

Stick around after the race for a great postrace party at Yeatman's Cove.

## Registration information:

#### Fees:

Adults (13 and over) **Pre-registration** is \$30 (includes an event shirt\*); **Packet Pick-Up registration** is \$35 and **Same day registration** is \$40 with an event shirt while supplies last.

<u>Children</u> (12 and under) **Pre-registration** is \$15 (includes an event shirt\*); **Packet Pickup registration** is \$20 and **Same day registration** is \$25 with an event shirt while supplies last.

\*Order by August 16th to be guaranteed a shirt

To pre-register, your registration form must be **postmarked** by 8/30/21.

Register online at: <a href="https://runsignup.com/Race/OH/">https://runsignup.com/Race/OH/</a> Cincinnati/FROGLEGS5k

### Early Packet pick-up:

If you are pre-registered, you can beat the crowd on race morning by picking up your bib and shirt early during these times:

Thursday, September 2 from 5-8 pm location: TBA, stay tuned!

Friday, September 3, from 12:00 – 4pm at Epilepsy Alliance Ohio office. 895 Central Ave, Suite 550 Cincinnati, Ohio 4520

\*All pre-registration event shirts must be picked up by 9:00 am on race day or they will be forfeited.



### To pay by:

Check: Mail registration form and check to:

Epilepsy Alliance Ohio 895 Central Ave, Suite 550 Cincinnati, OH 45202

<u>Credit Card</u>: Fill out registration on back and mail registration form with your credit card information to the above address:

| □MasterCard □Visa □American Express □Discove             |  |  |  |  |
|--|--|--|--|--|
| Card #   |  |  |  |  |
| Expiration Date: Security Code:                          |  |  |  |  |
| Amount:  |  |  |  |  |
| Signature:   |  |  |  |  |
| (you must fill in all of your billing information on the |  |  |  |  |
| reverse side to use credit card for payment)             |  |  |  |  |

### <u>To register on-line</u>, go to: <a href="https://runsignup.com/">https://runsignup.com/</a> Race/OH/Cincinnati/FROGLEGS5k

WAIVER: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in the Frog Legs 5K, and do hereby release i Heart Media and the Epilepsy Alliance Ohio, all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all the rules of participation, and acknowledge that the Race Committee may refuse or return my entry at its discretion. I understand the risks for such a run, and have trained adequately in preparation for the run. I HAVE NOTED ANY MEDICAL CONDITION on this entry form next to my signature. I will permit the use of my name and picture participating in this event for publicity.

| Signature                      |  |
|--------------------------------|--|
|                                |  |
| Parent Signature (if under 18) |  |