Send this entry form, along with your fee to: 114th Annual YMCA Turkey Trot, Delaware Family YMCA, 2564 Delaware Avenue, Buffalo, New York 14216.
Make all checks payable to the Delaware YMCA. Please complete all information requested.

LAST NAME | FIRST NAME | M.I.

NUMBER AND STREET

TOWN/CITY | STATE/PROV. | ZIP/POST CODE

SEX | AGE | E-MAIL ADDRESS | YMCA MEMBER | WORK PHONE | HOME PHONE

PSN/BIB
RACE USE ONLY

☐ **Check here if you have run 25 or more Turkey Trots*: Year Started: _____ *does not have to be consecutive**

You May Charge Your Entry Fee:

☐ MASTERCARD ☐ VISA ☐ DISCOVER ☐ AMEX

Credit Card No: _____ Exp. Date: _____

DECLARATION: In consideration of this entry, I herby, for myself, my heirs, executors, and administrators, waive release and forever discharge any and all rights and claims for damages which I may have hereafter accrued to me against the Delaware YMCA or YMCA Buffalo Niagara, or its or their respective officers, agents, representatives, successors, any other participating organization and all participating sponsors, and/or arising out of my traveling to, participating in, and returning from said athletic event. Additionally, I herby verify that I am registering under my own name and understand that any misrepresentation will subject me to disqualification prior to or subsequent to the event at the race director's discretion with no refund of the entry fee. I also understand that participation in this event constitutes permission to use my name and likeness for promotional purposes without compensation.

Signature

Parent Signature (if under 18)