

SANTA HAT HUSTLE MAIL-IN REGISTRATION

MUST BE POSTMARKED BY WEDNESDAY NOVEMBER 22ND



PRICE SCHEDULE

Until November 10th

5K Walk/Run - \$35
Merry Mile - \$25
Donner Dash Kids Run - \$10

Until November 17th

5K Walk/Run - \$40
Merry Mile - \$30
Donner Dash Kids Run - \$15

Until December 1st

5K Walk/Run - \$45
Merry Mile - \$30
Donner Dash Kids Run - \$15

Last Name		First Name	
Address	City	Zip Code	State
E-mail Address		Phone Number	
Age On Race Day	Birth Date (mm/dd/yyyy)	Gender	Male Female

LONG SLEEVE TECH SHIRT SIZE
NOT INCLUDED FOR KIDS RUN

S
 M
 L
 XL
 2XL*

*2XL is an extra \$3

CHOOSE YOUR EVENT

5K Run W/ Tech Shirt
 5K Walk W/ Tech Shirt
 Merry Mile W/ Tech Shirt
 1/4 Donner Dash Kids Run (12 & Younger)

Amount \$ _____

EMERGENCY CONTACT INFO

Full Name

Phone Number	Relationship To You
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MAIL-IN REGISTRATION WITH CHECKS PAYABLE TO:

Ultimate Fun Runs
23315 Woodward Ave. Ferndale, MI 48220
Fax Number: 248-543-3771

**CHECKS MUST BE POSTMARKED BY WED NOV 22ND
YOU MAY HAND DELIVER BY FRI NOV 24TH**

REFUND POLICY: NO REFUNDS unless you have been double charged or accidentally signed up more than once.
NO REFUNDS DUE TO WEATHER CONDITIONS

**Questions? Visit our website at
SantaHatHustle.com or call our
office at 248-543-1000**

RACE DAY PRICE
5K Walk/Run - \$50
Merry Mile - \$35
Donner Dash Kids Run - \$20

SANTAHATHUSTLE.COM

RELEASE FORM
Only Complete Entry Forms Accepted
APPLICATION WILL NOT BE PROCESSED WITHOUT SIGNATURE
"By indicating your acceptance signature, by registering, you understand, agree, warrant and covenant as follows:

I hereby release and hold harmless on behalf of myself, my child and/or representatives of Ultimate Fun Runs, LLC, Run as One Productions, The Social Connection, City of Royal Oak and all event sponsors and organizers from liability for injuries or damages which I or my child may sustain while participating in this activity even if the injuries are caused by the sole negligence of the City or the sponsors or event organizers. I understand that I am responsible for medical coverage for me and my child."

Athlete Signature (or parent, if under 18): **Signature Required**

Date

PLEASE ONLY FILL OUT IF YOU ARE REGISTERING MORE THAN ONE PERSON

Questions? Visit our website at SantaHatHustle.com or call our office at 248-543-1000

Second Participant

Last Name		First Name	
Age On Race Day	Birth Date (mm/dd/yyyy)	Gender: M F	NOT INCLUDED FOR KIDS RUN Shirt Size: S M L XL 2XL* <small>*2XL is an extra \$3</small>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5K Run W/ Tech Shirt	5K Walk W/ Tech Shirt	Merry Mile W/ Tech Shirt	1/4 Donner Dash Kids Run (12 & Younger)

Amount _____

Third Participant

Last Name		First Name	
Age On Race Day	Birth Date (mm/dd/yyyy)	Gender: M F	NOT INCLUDED FOR KIDS RUN Shirt Size: S M L XL 2XL* <small>*2XL is an extra \$3</small>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5K Run W/ Tech Shirt	5K Walk W/ Tech Shirt	Merry Mile W/ Tech Shirt	1/4 Donner Dash Kids Run (12 & Younger)

Amount _____

Fourth Participant

Last Name		First Name	
Age On Race Day	Birth Date (mm/dd/yyyy)	Gender: M F	NOT INCLUDED FOR KIDS RUN Shirt Size: S M L XL 2XL* <small>*2XL is an extra \$3</small>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5K Run W/ Tech Shirt	5K Walk W/ Tech Shirt	Merry Mile W/ Tech Shirt	1/4 Donner Dash Kids Run (12 & Younger)

TOTAL PARTICIPANTS _____

Amount _____

TOTAL DUE \$ _____