



Saturday, March 7, 2020

7:00 AM-12 PM

McAllen Municipal Park

Make sure everything is filled out

** Please make all checks payable to : Keep McAllen Beautiful, Inc.

Name (First Last) _____

Address _____ City, State, Zip _____

Email _____ Phone # _____

Emergency Contact Name and Phone number _____

****T-shirts deadline: Sunday February, 16th. *DOB REQUIRED For All Events**

Cycling - Ride Starts at 7:00 am

25-Mile Ride ___ M/F *DOB ___/___/___ \$25.00 T-Shirt: S M L XL XXL

100K Ride ___ M/F *DOB ___/___/___ \$35.00 T-Shirt: S M L XL XXL

Running - Race Starts at 7:30 am

5k ___ M/F *DOB ___/___/___ \$25.00 T-Shirt: S M L XL XXL

10k ___ M/F *DOB ___/___/___ \$35.00 T-Shirt: S M L XL XXL

In consideration of my entry in the walk, run and ride known as the Arbor Day Celebration, I hereby, for myself, heirs, executors, administrators, waive and release any and all rights and claims for damages I may have against the City of McAllen and all event sponsors and their agents for any injuries incurred by me from or out of my participation in the Arbor Day Celebration. I attest that my condition has been verified by a physician. I also agree that any sponsor may subsequently use for publicity and/or promotional purposes, pictures of my participation in this event without further obligation or liability from me.

Applicant Signature _____

Signature of parent or guardian if UNDER 18 _____

NO ON-SITE REGISTRATION. REGISTER BEFORE DAY OF EVENT!!!

For more information or to register on-line visit www.keeptomcallenbeautiful.org

Kids 1 Mile Run - March , 2020

Ages 12 and Under

****T-shirts while supplies last.**

Child's Name (First Last) _____

Address _____ City, State, Zip _____

Email _____ Phone # _____

Emergency Contact Name and Phone number _____

School Attending _____

Male/Female *DOB ____/____/____ T-Shirt: YS YM YL YXL AS

Additional Children:

Name (First Last) _____

Male/Female *DOB ____/____/____ T-Shirt: YS YM YL YXL AS

School Attending _____

Name (First Last) _____

Male/Female *DOB ____/____/____ T-Shirt: YS YM YL YXL AS

School Attending _____

**** If someone is running with child please include their name below:**

Full Name _____ Age _____

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Signature of parent or guardian _____



KEEP AMERICA BEAUTIFUL AFFILIATE

Keep McAllen Beautiful
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McAllen, TX 78504
956-681-4562