JOHNSON WORKS INC.			
Th	ne Flying Anvil 5k l	Run/Walk	
Th	nursday July 4th, 2024	at 8:00am	
	Entry Form		
Name			
Mailing Address			
City, State, Zip Code e-mail	Address		
Telephone number (include area code)	Date of Birth	Age on Race Day	
Control of the Contro	hirt size AM, AL, AXL, AXXL) YM, YL)		
Waiver: In consideration of accepting this entry executors and administrators assigns, waives, recoordinators, workers, volunteers; and all City, Flying Anvil 5k Run/Walk, from any kind of list whatsoever arising our of or in the course of me and quotations from me in legitimate accepter with the course of me and quotations from me in legitimate accepter with the course of me and quotations from me in legitimate accepter with the course of me and quotations from me in legitimate accepter with the course of me and quotations from me in legitimate accepter.	releases, discharges and cover, County, District, State, or plainting for death, personal in participation in the event.	enants NOT TO SUE Johns ublic agencies connected w jury, or personal damage of I grant full permission for	son Machine Works, event with Johnson Machine Work of any kind or nature organizers to use photograp

Signature (Parent/Guardian signature required for children under the age of 18years of age.)

Date