## Step Out for IDFNZ/ Kids Foundation Registration Form

First name:		Last name:	
□ Male □ Female		Age on race day:	
Email:		Phone:	
Street address:			
City:	State:	Zip:	
Choose a race to enter:			
□ 5.25K Run □ 5.25K	Walk		
□ 3.7K Run □ 3.7K Wal	lk □ Kids D	Pash entries on the day with gold coin do	nation
Tick if you would like to purch	hase a T-shirt a	at \$25 each □	
T-shirt size:			
OXS OS OM O	OL OXL	□ XXL	
Waiver			
☐ By checking this box, I	agree to the S	Step out for IDFNZ event waiver over	leaf
Signature (parent/guardiar	n if under 18):	Date: MM /	DD/YYYY