

Resolution Run



Benefiting United Cerebral Palsy
www.RunNashville.org

5K Run, Walk or Roll New Year's Day

Race Begins
 at 10:00 a.m.

Race Day Registration
 begins at 8:30 a.m.

Hilton Park
 Downtown at
 Demonbreun & 5th



Special Student Team Rate: For HS/College
 Student Teams of 5 or more - \$16 per team member
Pre-Registration Only.

*Registrations must be submitted by team coach.
 School and team name must be included with registrations.*

Standard Registration:

Preregistration	Race Day Registration
Individual \$20	Individual \$25
Family (up to 3) \$50	Family (up to 3) \$65

Certified Course
Corporate Team
Challenge Event



Registration Form

First Name _____ Last Name _____

Age _____ Sex: M or F _____
 If you own your own ChampionChip enter the number here _____
 Official Use _____

Mailing Address _____

City _____ State _____ Zip _____

E-mail Address _____ Corporate Team Challenge? [] Yes _____

T-Shirt Size _____ Team: _____

Register Online at **active.com**
part of the activeNETWORK

Make check payable to: UCP of Middle TN

Mail completed entry form to: Resolution Run, P. O. Box 210735, Nashville, TN 37221-0735

In consideration of acceptance of my entry into this race, I, for myself, my executors, administrators and assigns, do hereby release, discharge and hold harmless against liability United Cerebral Palsy of Middle Tennessee, Inc., Nashville Striders, Inc., Metro Government of Nashville and Davidson County and its employees, and all sponsoring businesses and organizations from claims of damages, injury or death, demands, actions, and causes of actions whatsoever, in any manner arising or growing out of my participation in this event. I also hereby consent to emergency treatment in the event of injury or illness. I understand that use of an electronic timing device (ChampionChip) may be offered to me by the Nashville Striders. If I should lose or fail to return this device upon completion of the race, I agree to pay a \$30.00 replacement fee to the Nashville Striders.

Signature and Date _____

Guardian's Signature (if under age 18) and date _____