

Hanna Richardson
256-443-3629

Kappa Delta Shamrock 5K Registration

Please join us for Kappa Delta's 17th Annual Shamrock 5K at 8:00 a.m. on Saturday, April 1, 2017. All proceeds go to the National Children's Advocacy Center and Prevent Child Abuse America.

Registration includes a T-shirt (size not guaranteed), raffle ticket, and admission to the KD Carb Feast pasta dinner the night before the race! The cost of registration is \$20.

The Packet Pick Up will be TBA at Fleet Feet (2722 Carl T. Jones Drive). The Carb Feast will take place at the Kappa Delta House (518 Fraternity/Sorority Row) on Friday, March 31st from 6 - 8 p.m. Shamrock Run will begin at 8 a.m. on April 1st at the Kappa Delta House.

If you have any questions, please contact Miranda Southern at mls0037@uah.edu or 256-590-6457.

IMPORTANT: Your online registration is not complete until your registration fee of \$20.00 is received. You may use our online payment system, or contact Miranda Southern to make payment in the form of check or cash.

Name

<input type="text"/>	<input type="text"/>
<small>First</small>	<small>Last</small>

Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	
<small>MM</small>	<small>DD</small>	<small>YYYY</small>	

Age (as of March 19, 2016)

Gender

Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>###</small>	<small>###</small>	<small>####</small>

T-Shirt Size

Address

Street Address

Address Line 2

City

State / Province / Region

Phone / Zip Code

Country

Email Address

If you are running for a KD sister, please enter her name here

First

Last

I, individually (and/or as parent or guardian of the named minor) for and in consideration of time entry in the aforementioned event, do hereby release, remise, waive and forever discharge the Epsilon Lambda Chapter of Kappa Delta Sorority, The City of Huntsville, its directors, any officers, agents, officials, employees, volunteers, and sponsors from any liability claims, demands, actions, or causes of action whatsoever arising out of, or related to, any injury, illness, loss of damage, including death relating to participation in the aforesaid event. I further state I am in proper physical condition to participate in this event and will abide by all rules of the event. (Children under 14 must have a parent signature.) By entering your name in the space below, you are agreeing to the conditions stated above.

Signature

First

Last