



Eleventh Annual NACM 5K

Wednesday, July 14, 2004

COST: \$20 per race entrant / \$15 for T-Shirt Only

Get up early and join your colleagues for this year's NACM 5K. All entrants receive a Fun Run/Walk T-shirt. Prizes will be awarded for top walkers and runners in several age categories, along with the ever-popular CASH PRIZE to the fastest male and female to complete the course in *pantyhose*.

When: Wednesday, July 14, 2004
Where: To be determined
Time: 7:00 a.m. – Walkers Start
7:15 a.m. – Runners Start

Please complete a separate form for each race participant.

	circle one	circle one	circle one
AGE ON RACE DAY	M / F	RUN / WALK	T-Shirt Size (adult sizes only)
_____			S / M / L / XL / XXL

I'm not racing, but I want a T-shirt for \$15 (circle shirt size above)

First Name _____ MI _____ Last Name _____

Name of Registered Attendee (If above name not registered attendee) _____

Court/Company _____

City _____ State _____ Zip _____ Country _____

E-mail _____

Phone (_____) _____ Fax (_____) _____

I realize that this event is physically strenuous. I nevertheless wish to compete and assume the risk of any injury during the race or on the course. I give up any claims for injuries that I sustain, including death, and agree to hold harmless the National Association of Court Management, its directors and officers, employees and volunteers, and anyone connected with the race. I agree that the race may use any photographs taken of me without compensation. I have read and understand all of the above. I am making this agreement of my free will in exchange for the privilege of running or walking this race and using the facilities provided by the race.

SIGNATURE _____

(If entrant is under 18, signature of parent or guardian is required)

Payment Method	
<input type="checkbox"/>	Enclosed is a check for \$_____ payable to NACM (Federal Tax ID #54-1327921)
<input type="checkbox"/>	Charge \$_____ to: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa
Card #:	_____ Exp. Date: Mo. _____ Yr. _____
Signature (required for all charge orders)	_____

Please complete and return by **June 18, 2004**, to:
 NACM c/o National Center for State Courts
 300 Newport Avenue, Williamsburg VA 23185
 (800) 616-6165 • (757) 259-1841 • FAX (757) 259-1520