

REGISTRATION FORM

Please provide the following information and mail along with your entry fee to:

> MGCF "Gorilla Headquarters" 4380 S. Syracuse St. #455 Denver, CO 80237

You may also:

- Call in your entry 1-866-gorilla or (720) 524-0272
- Register online at www.cincinnatigorillarun.com

First Name:				
Last Name:				
Address:				
City:	State:			
Zip: Phone: ()			
Email:				
Date of Birth: /		□ Male		
How did you hear about the run?				
Are you part of a team? ☐ Yes If yes, enter team name:				

Registration Fees:

☐ First Time Adult Gorilla:	\$99.95			
orilla Suit Size: 🗆 S 🗀 M A <i>pprox. fit</i> (under 5') (5'0-5'7				
☐ First Time Adult Banana:	\$60.00			
□ Returning Adult:	\$40.00			
☐ First Time Little Gorilla (a	ges 12 & under): \$30.00			
Approx. fit (under 4'4) (4'5-4'11) ittle Gorilla Suit Size: ☐ S ☐ L				
□ Returning Little Gorilla (ages 12 & under): \$15.00				
Cincinnati Gorilla Run Merchandise:				
Gorilla Run T-shirt	Silverback After Party			
\$20	Tickets \$10			
S M L XL XXL	Qty:			
66	Purchase tickets for			
West of the second	friends & family to join you at the after party!			
Donations:				
Make a contribution to The Mountain Gorilla				
Conservation Fund & save a gorilla!				
□\$10 □\$25 □\$50 □\$100 □ Other				

Donations to MGCF are tax-deductible.

Payment Information:

☐ Cash ☐ Check (made payable to MGCF) ☐ Crodit Card* (Vice Matter Card Discours on AMEX)				
☐ Credit Card* (Visa, Master Card, Discover or AMEX)				
Total Amount: \$				
*Credit card processing fees apply.				
Waiver:				
Acknowledgment and Assumption of Risk and Release: In consideration of my entry, I intend to be legally bound for myself, my executors, administrator				
regard source for myself, my exceutors, durining the total				

and assignees, do hereby waive and release the sponsors of this event and all persons and agencies connected with this event from all claims for damages, injuries or death, arising from my participation in and the travel to and from this event. I recognize that I may become injured or incapacitated in a location where it is difficult for management to get required medical aid to me in time to avoid physical injury or even death. I also understand and agree that a sponsor may subsequently use for publicity and/or promotional purposes my name and/or pictures of me participating in this event without obligation of liability to me. I also understand entry fees I pay are non-refundable. I have read this waiver carefully and having done so I am signing it voluntarily.

Parent/Guardian		
Signature:		
Date:		