

Tenth Annual  
**4th of July**  
**Freedom Run**



**Wednesday, July 4, 2018**

For more information visit: [www.taggrun.com](http://www.taggrun.com)

**ENTRY FORM**

Please mail completed entry form and fee to:  
**Tagg Running Events**  
 P.O. Box 1029, Vail, AZ 85641

One entry form per person, OK to copy

**Freedom 5K Run/Walk**

**FEE:** (circle price)

- 17 and under** **\$20**
- 18 and over** **\$25**
- All ages from 6/1 to race day** **\$30**
- Upgrade to Technical T-Shirt** **\$15**

Men/Women Sizing  
 (must be received by 6/21/18)

XXL T-shirt Extra Fee **\$4**

**Donation:**  
 That Others May Live Foundation \$ \_\_\_\_\_

**Total \$** \_\_\_\_\_

T-Shirt: (circle one)

**Adult sizes** S M L XL XXL (add\$4)

**T-shirt guaranteed if entry received by 6/21/18**

**Divisions:**  
 (check one)

- |          |                          |         |                          |
|----------|--------------------------|---------|--------------------------|
| <b>M</b> | <input type="checkbox"/> | 12 & ↓  | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 13 - 17 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 18 - 24 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 25 - 29 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 30 - 34 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 35 - 39 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 40 - 44 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 45 - 49 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 50 - 54 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 55 - 59 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 60 - 64 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 65 - 69 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 70 - 74 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 75 - 79 | <input type="checkbox"/> |
|          | <input type="checkbox"/> | 80+     | <input type="checkbox"/> |



# Freedom Run

**5K Run/Walk**

**July 4, 2018**

**Location:**

Golf Links Complex Ramada #3  
 2400 S. Craycroft Road  
 Tucson, AZ

**Course:**

Along the bike path  
 and through the park

**Registration & Bib**

**Number Pickup:**  
 5:30 - 6:25 a.m.

**Start Time:**

6:30 a.m. - 5K Run/Walk

**Benefiting:**

That Others May Live

**Features:**

- FREE t-shirt guaranteed if pre-registered by 6/21/18
- Awards to top 3 finishers in divisions
- Refreshments
- On-line registration at [taggrun.com](http://taggrun.com)

**Race Director:**

Steve Taggart - (520) 820-6447  
[taggrunningevents@yahoo.com](mailto:taggrunningevents@yahoo.com)



Official Use only

**COMPLETE FRONT & BACK OF ENTRY FORM**

PLEASE COMPLETE ALL INFORMATION • ONE FORM PER PARTICIPANT

FIRST NAME	LAST NAME	PHONE
M F	BIRTHDATE (MM/DD/YY)	AGE ON RACE DAY
	AREA CODE	( ) -
E-MAIL ADDRESS:	APT. NUMBER	ZIP
STREET ADDRESS	STATE	
CITY		

**WAIVER:** I hereby release the City of Tucson, Parks and Recreation, Taggrun LLC, USATF and all municipal agencies whose property and/or personnel are used and other sponsoring or co-sponsoring company(ies), agency(ies), or individual(s) from responsibility or any injuries or damages I may suffer as a result of my participation in the Freedom Run 5K and all related events. I hereby certify that I am in good condition and am able to safely compete in this event. I will additionally permit the use of my name and pictures in broadcasts, telecasts, newspapers, brochures, etc. and I also understand that the entry fee is non-refundable. As a participating athlete I certify that all information provided in this form is true and complete. I have read the entry information provided for the event and certify my compliance by my signature below. Bib numbers are not transferable.

**IF ATHLETE IS UNDER AGE 18:** This is to certify that my son/daughter has my permission to compete in Freedom Run 5K, is in good physical condition, and that race officials have my permission to authorize emergency treatment if needed.

**Make check payable to:**  
**Tagg Running Events**

PARTICIPANT'S SIGNATURE (or parent/guardian if participant is under 18 years) \_\_\_\_\_ Date \_\_\_\_\_