

Run for Tanzania

Charity Fun Run



In association with



Supporting HAT - Health Australia & Tanzania (Inc.) Development Projects

PLEASE FILL IN FORM AND HAND TO COBURG OFFICIAL ON DAY OF COMPETITION

E-mail address must be completed in order to qualify for spot prizes. HAT and the Coburg Harriers may use your E-mail address to advise you of coming events. Your E-mail will not be to given or sold to a third party.

Name _____

Address _____

Email _____

Phone _____

Emergency Contact Name _____

Emergency Contact Phone _____

How did you hear about Run for Tanzania?

- Cool Running Website Coburg Harriers Website
- Radio HAT newsletter
- Flyer HAT Website
- Word of mouth
- Other (Please State)

ENTRY FORM

DISTANCE	COST
<input type="checkbox"/> 4 km walk	\$ 10.00
<input type="checkbox"/> 4 km run	\$ 10.00
<input type="checkbox"/> 4 km run Juniors	\$ 5.00
<input type="checkbox"/> 6 km run	\$ 15.00
<input type="checkbox"/> 12 km run	\$ 15.00



HAT-Health Australia & Tanzania (Inc) was founded in March 2005 to raise funds for development projects that improve the health of Tanzanian's. Proceeds from Run for Tanzania will finance the construction of wells in the Kimbwi village in the Singida region of Tanzania. All projects are developed in consultation with local villagers to meet their priorities and the needs of their communities. To find out more please visit our information table on the day

HELD AT THE HAROLD STEVENS ATHLETIC FIELD OUTLOOK ROAD COBURG (MELWAYS REF 18 A 10)

1. The undersigned, in consideration of and, as a condition of my entry into the HAT Health Australia & Tanzania (Inc) and Coburg Harriers Inc. event named on this entry form, for myself, my heirs, executors and administrators hereby waive all and any claim, right or cause of action which I or they might otherwise have for or arising out of loss of my life or injury, damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequence upon my entry or participation in the said event.
2. This waiver, release and discharge shall be and operate separately in favor of all persons, corporations and bodies involved and otherwise engaged in promoting or staging the event and the servants, agents, representatives and officers of any of them, and includes, but not limited to, Commonwealth and state departments and instrumentalities, medical and paramedical practitioners and personnel and shall operate whether or not the loss, injury or damage is attributable to the act or neglect of any or more of them.
3. I have read the rules and conditions of the event as stated in the declaration above and upon literature and other materials distributed in connection with the event and agree to abide by them.

.....
Signature

.....
***Signature of Parent/Guardian if under 18**

.....
Date

*I Certify That I Am The Parent/Guardian of This Event

And That He/She Has My Consent To Participate In