



Annual Seminole Stampede Registration Form

Saturday, November 14, 2020 | 8 AM Shotgun Start | Seminole City Park

We are so happy that you are planning to participate in this year’s Seminole Stampede! Please complete this form in its entirety, with **bolded** sections being required, and read through the attached waivers & agreements before submitting. This form will be counted as registration for one (1) individual. If there are more people in your party, please fill out a form for each person. This application can also be found and completed online. If you would like an electronic version, please visit our website at MySeminoleChamber.com/Stampede

_____ Please mail or drop-off form and payment to: _____
 Seminole Chamber
 9200 113th St
 Seminole, FL 33772

Participants Information

First Name: _____ **Last Name:** _____

Phone: _(_____) _____ **Email Address:** _____

Race Time*: _____

Gender		Date of birth (Month/Day/Year)	Shirt Size (included with registration)				
<input type="checkbox"/>	<input type="checkbox"/>	____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Male	Female		Small	Medium	Large	XL	2XL

Emergency Contact Information

First Name: _____ **Last Name:** _____

Phone: _(_____) _____ **Relationship:** _____



What event will you be participating in?		How will you be participating?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5K	1 Mile	Running	Walking
\$25	\$10		

WAIVERS & AGREEMENTS

Please read the following waivers and agreements carefully. By signing, you acknowledge that you have both read and understood all text presented to you as part of the registration process.

Race Registration Waiver:

All runners participate at their own risk. In consideration for this entry being accepted in the Seminole Stampede 5K and 1 Mile fun runs, the runner waives any and all legal rights and claims for damages which they may sustain against the Greater Seminole Area Chamber of Commerce, Pinellas County, or any other Government or Private Entity affiliated with the Stampede. The participant also understands that there is no obligation to refund any money which has been paid for this event if the races are not held as scheduled. The participant consents to the use of any photographic material, including film and computer information, which may include the participant. All persons under 18 years of age must have the written consent of a parent or legal guardian to participate. The Participant also consents to permit emergency medical treatment in the event of injury or illness.

Sign X:

If you have any questions or concerns, please reach out to us and we will be happy to help you!

* What is your race time? Ex. 7 min per mile. We will use this to stagger start times in order to follow CDC Guidelines