



Trailblazer 2020 - RACE AT YOUR PACE Registration Form

PARTICIPANT INFORMATION

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Daytime Phone: _____

E-mail Address: _____

Gender: Male _____ Female _____ (optional)

Date of Birth: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

How Did You Hear About This Event?

_____ Facebook

_____ Family/Friend

_____ Internet/Website

_____ Past Trailblazer 5k Participant

_____ Print Marketing (newspaper, etc.)

_____ Active.com

_____ Other

Who is this registration for?

_____ Myself, 18 or older

_____ Someone else, 18 or older

_____ Someone else, below 18

Registration Cost

_____ Under 65 with t-shirt	\$30
_____ Under 65 with t-shirt and medal	\$35
_____ 65 and over*	FREE

**The price schedule for individuals over 65 is for residents located in the Generations service area of Daviess, Dubois, Greene, Knox, Martin & Pike counties and residents of Lawrence county Illinois.*



**Please make checks payable to :
Generations Trailblazer 2020**

**Mailing Address:
Generations
P.O. Box 314
Vincennes, IN 47591**

T-shirt size: Small _____ Medium _____ Large _____ X-Large _____ XXL _____ XXXL _____