

SATURDAY
21 OCT

CROWS NEST STATE SCHOOL
COLOUR RUN

SCHOOL
COLOUR
FUN RUN™

Race Kit includes



REGISTER NOW!

Call Crows Nest State School on 4698-3111
or complete the Registration Form overleaf

Need more information? Please contact Crows Nest State School or visit www.facebook.com/CrowsNestSS





REGISTRATION FORM

Crows Nest State School Colour Run

Date

21 October, 2017

Time

Check In: 6:00am

(wristbands must be worn for entry)

Race Starts: 7:00am

Finish Time: 9:30am

Location

Crows Nest State School

1 Littleton Street

CROWS NEST QLD 4355

Course

5km around Crow Nest State School grounds.

RAIN OR SHINE

(THUNDERSTORMS WILL BE POSTPONED)

Registrations

Early Registration Fee

Registration fees received on/or before 3:00pm on 6 October, 2017 will pay only \$10. Payment is to be made in cash to the Crow Nest State School.

After 6 October, 2017 a registration fee of \$15 will apply. Cash payments can be made to the Administration Office or at the Colour Run check in.

Safety is our top priority. Information regarding the powder used in the Colour Run can be obtained through the Administration Office at Crows Nest State School.

Rest assured, its top quality powder made of 98% corn starch and 2% colouring. Made in India, it's non-toxic, non-flammable, skin safe, environmentally friendly and bio-degradable.

For more information, please contact Crows Nest State School on 4698 3111 or via email, hthom62@eq.edu.au.

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Please complete, sign and return to the Crows Nest State School's Office,
together with payment before the 6th October, 2017 before 3:00pm

First Name: _____ Surname: _____

Contact Number: _____ Email: _____

Waiver: In consideration of your acceptance of this entry, I hereby for myself, my executors and administrators waive any and all rights and claims for damages I may have against Crows Nest State School, its respective representatives and successors and all sponsors, and will hold them harmless from any injury suffered in this event. Also, none of the above is responsible for the loss of neither personal items nor any other form of aggravation in connection with this event. I have been warned that I must be in good health to participate in the event.

Signature: _____ Date: _____

Parent/Guardian

OFFICE USE ONLY.

DATE PAID: _____ DATE RACE KIT SUPPLIED: _____