



NAME First _____ Middle _____ Last _____

DATE OF BIRTH _____ Age on Race Date (July 22nd, 2016) _____ GENDER _____

*Birth date is required for 5k participants

ADDRESS _____

CITY _____ STATE/ZIP _____

PREFERRED PHONE _____ EMAIL _____

EVENT REGISTERING FOR: (Check only one) Race details can be found online at www.wheelsandheels.org.

- Wheelchair racer 5k:** Para Quad Handcycle _____
- Run/walker:** 5k Run 1k Fun walk
- I will participate as an **individual**
- I will participate as part of a **Team** TEAM NAME _____

ENTRY FEE: Make checks payable to: NSCIA-SWC and mail to PO Box 270096, Milwaukee, WI 53227

Early Registration – Before June 30th

Registration – After June 30th

- | | |
|---|--|
| <input type="checkbox"/> Individual – \$20.00 | <input type="checkbox"/> Individual – \$25.00 |
| <input type="checkbox"/> Family (two adults & up to 4 children) – \$80.00 | <input type="checkbox"/> Family (two adults & up to 4 children) – \$100.00 |
| <input type="checkbox"/> Team* (up to 10 people per team) – \$150.00 | <input type="checkbox"/> Team* (up to 10 people per team) – \$200.00 |

*For Team Registrations, each team member will need to complete a registration form and sign a waiver. This can be completed on race day.

Team members (if known):

| | First name | Middle | Last name | Gender | Age |
|----------|------------|--------|-----------|--------|-----|
| Captain | | | | | |
| Racer 2 | | | | | |
| Racer 3 | | | | | |
| Racer 4 | | | | | |
| Racer 5 | | | | | |
| Racer 6 | | | | | |
| Racer 7 | | | | | |
| Racer 8 | | | | | |
| Racer 9 | | | | | |
| Racer 10 | | | | | |

There will be no early pickup of race kits. Registration opens at 5:00pm in Veteran's Park.