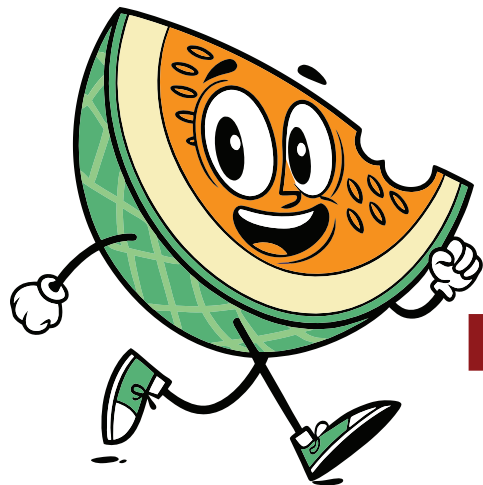


FALLON COMMUNITY THEATRE, INC. PRESENTS

CANTALOUPE CANTER

5K FUN RUN/WALK



Saturday, August 23, 2025

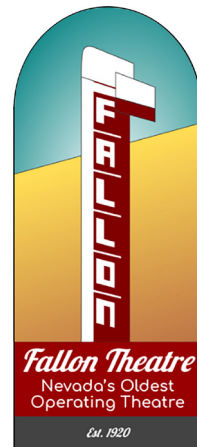
*Registration on the day of the race
begins at 7:00AM*

Race Starts at 8:00AM

REGISTRATION FORM

Location: Churchill County Indoor Pool,
333 Sheckler Rd., Fallon, NV 89406

Register by August 13, 2025 to guarantee an event t-shirt



NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

SEX (circle one): M F AGE: _____

EMERGENCY CONTACT: _____ PHONE: _____

EARLY REGISTRATION: \$25 ADULT SHIRT SIZE: S M L XL 2XL (+\$2) 3XL (+3)

RACE DAY REGISTRATION: \$30 CHILD SHIRT SIZE: S M L

Waiver: In consideration of your accepting my entry, I, intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Cantaloupe Canter, Fallon Community Theatre, Inc., and any of their officials and representatives for any and all injuries suffered by me in the Cantaloupe Canter run including liability while traveling to and from the event. I understand I must have my dog on a leash if participating in this event.

*I also understand that due to the nature of this program, I/my children may be included in photos or videos that will be used for media information or advertising of future programs. I understand by signing this hold harmless agreement that I authorize the use of any photos or videos taken during this event.

SIGNATURE: _____ DATE: _____

Parent or Guardian's signature required if the participant is under 18 years of age.

Make checks payable to: Fallon Community Theatre (or FCT)
For more information, call (775) 691-9537

Registrations can be dropped off at Kent's Supply Center, The Fallon Theatre, or email Karla@kentssupply.com

(Official Use Only) Date: _____ Staff Initials: _____ Payment: _____ Method: _____