



ENTRY FORM 2024

(FILL IN CAPITAL LETTERS)



PERSONAL INFORMATION:

Family Name: (as shown on Passport or Identity Card)

Given Name: (as shown on Passport or Identity Card)

Sex: Male Female

Mailing Address:

Emergency Contact Name:

Mobile No.

Email Address of Participant:

Home Tel.:

Work No.

Nationality:

Date of Birth:

Day

Month

Year

Country of Birth:

State of Origin:

LGA:

● THERE IS NO CONTRADICTION TO PARTICIPATION, PARTICIPANTS MUST BE DOUBLE VACCINATED

CATEGORY PARTICIPATION

1. RUNNING FOR THE PRIZE?

Yes

No

If yes, what is your time in 10km?

Which competition?

2. RUNNING FOR A CAUSE? (Cancer, HIV etc.)

Yes

No

If yes, what cause? (Specify)

3. RUNNING FOR FUN?

Yes

No

4. RUNNING AS A OKPEKPE INDIGENE?

Yes

No

If yes, then specify your town

5. RUNNING OR LATE CHIEF RAYMOND DOKPESI?

Yes

No

If yes, then specify your town

Official use only

REGISTRATION NUMBER:

SIGNED:



WAIVER AND RELEASE FROM LIABILITY

Warning: - participation in the Okpekpe Road Race can be a serious threat to the health of individuals who are not in excellent physical condition. For, and in consideration of, my participation in the Okpekpe road race, I myself, my executors, administrators, heirs, and assignees do hereby release and discharge the AFN, Pamodzi, organizing committee, and all sponsors, agencies, subsidiaries, affiliates and beneficiaries jointly and severally and hold and waive harmless from and against any and all actions, claims, injuries, incapacitation/death demands, liabilities, loss, damage or expenses of whatever kind nature including, but not limited to, attorney fees which at any times may be incurred by reason of my participation in or my preparation for any of the afore said events, I attest and verify that I have full knowledge of the risk involved in this event, and I am physically fit and sufficiently trained to participate. The undersigned grant full permission to any and all foregoing use to his/her likeness, including photographs and videotape for publicity and advertising purpose without compensation.

Signature of Athlete: _____

Signature of Parent: _____

Official use only

**REGISTRATION
NUMBER:** _____

SIGNED: _____