

# 34<sup>th</sup> Annual Race Against Breast Cancer

## 5K Run/Walk Fundraiser

Reynolds Lodge Shawnee Lake // October 4, 2025 // [rabctopeka.org](http://rabctopeka.org)

*Entry Form: (One per participant - Please Print Legibly)*



Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date of Birth (required) \_\_\_\_\_ Email \_\_\_\_\_ Gender (M / F) \_\_\_\_\_

**Will you be a:** Runner \_\_\_\_\_ Walker \_\_\_\_\_

**Donation (no entry) \$** \_\_\_\_\_

**Please Check one:** I am a breast cancer survivor No \_\_\_\_\_ Yes \_\_\_\_\_

If you are a breast cancer survivor, you receive a crew neck sweatshirt as our gift to you. Please check the desired size. **Adult S** \_\_\_\_\_ **Adult M** \_\_\_\_\_ **Adult L** \_\_\_\_\_ **Adult XL** \_\_\_\_\_ **Adult 2XL** \_\_\_\_\_ **Adult 3XL** \_\_\_\_\_

**Please check shirt size:** Child S \_\_\_\_\_ Child M \_\_\_\_\_ Adult S \_\_\_\_\_ Adult M \_\_\_\_\_ Adult L \_\_\_\_\_ Adult XL \_\_\_\_\_  
Adult 2XL \_\_\_\_\_ (\$5 extra) Adult 3XL \_\_\_\_\_ (\$5 extra) No Shirt desired \_\_\_\_\_ (donate cost to RABC)

To receive a 2025 5K shirt you must register by September 13.

**Required 5K Entry Waiver:** As a participant in the RABC 5K Run/Walk, I assume all responsibility for injury to me or damage to property which may occur during the event or while I am on the premises of the event. I hereby release and hold harmless the RABC, Shawnee County Parks & Rec, promoters, supporters and all other persons /businesses associated with the event from any and all liability for injury or damage whether caused by the negligence of any of the listed above. I grant permission for any and all of the foregoing to use any photographs, videos, recordings or any other record of this event for any purpose whatsoever.

X \_\_\_\_\_

Signature (guardian's signature if registrant is a minor) \_\_\_\_\_ Date \_\_\_\_\_

If paying by credit card, register at [rabctopeka.org](http://rabctopeka.org).

Thank you for your support!

**Mail completed form with payment to:**

**RABC, PO Box 4458, Topeka, KS 66604**

5K Individual Entry: \$ \_\_\_\_\_

**Until Sept 13-\$30; Sept 13 through Oct 4-\$40**

5K Team Entry: (min. of 5 members) \$ \_\_\_\_\_

Team Name: \_\_\_\_\_

*Each team member needs own entry form & signed waiver*

**Until Sept 13-\$25; Sept 13 through Oct 4-\$35**

Walker Dog Entry: **one dog with registered walker - \$10**  
\$ \_\_\_\_\_

Dog Breed: \_\_\_\_\_

Dog Age: \_\_\_\_\_ Dog Sex: \_\_\_\_\_ Vaccinated: \_\_\_\_\_

### **Entry fees are per person**

Option to purchase Crew neck RABC Sweatshirt

Check desired size CS \_\_\_\_\_ CM \_\_\_\_\_ \$25 each \$ \_\_\_\_\_

AS \_\_\_\_\_ AM \_\_\_\_\_ AL \_\_\_\_\_ AXL \_\_\_\_\_ \$25 each \$ \_\_\_\_\_

A2XL \_\_\_\_\_ A3XL \_\_\_\_\_ \$30 each \$ \_\_\_\_\_

Drawing Ticket for 5K Quilt \$2 – 1 ticket

\$10 – 6 tickets \$ \_\_\_\_\_

**Donation to the RABC** \$ \_\_\_\_\_

**Total Amount Due: (No Refunds)** \$ \_\_\_\_\_