



**Thursday, Sept. 16, 2010**  
**7 p.m.**  
**Adjacent To Turner Field**

Questions? [info@KPCorporaterunwalk.com](mailto:info@KPCorporaterunwalk.com) or (404) 843-8727. Fax: (404) 252-3971

**CAPTAINS!**  
**We encourage**  
**you to use our online options**  
**for all registration**  
**and reservations.**

Past Participant  New

PAYMENT BOX	
<p><b>We accept VISA, MasterCard and American Express.</b></p>	<p><i>Note: Please send one check to cover all company participants.</i></p> <p>Check # _____ <b>All checks should be made payable to Galloway Productions.</b></p> <p>_____ participants x \$_____ each ..... \$ _____</p> <p>(Until August 16, 2 p.m. - \$25 &amp; after August 16, 2 p.m. - \$30)</p> <p>Fed Ex (if applicable) ..... \$ 20.00</p> <p>Total amount of check or charge ..... \$ _____</p> <p>Card # _____ Exp. Date _____</p> <p>Cardholder Name _____</p> <p>Signature _____</p>

Company Captain Name		Business #	
Co-Captain Name		Business #	
Company Name	Total # Employees	Total # Employees in Atlanta	Onsite Fitness Center? <input type="checkbox"/> Yes <input type="checkbox"/> No
Captain's Email Address		Co-Captain's Email Address	
Company Address		County	
City	State	Zip	
CEO/President Name	Business No.	Email Address	
Dir. of Human Resources or Dir. of Corporate Communications	Business No.	Email Address	
Dir. of Fitness/Wellness	Business No.	Email Address	

How did you hear about us?  Radio  Newspaper  TV  Brochure  Flyer  Phone  Friend  Billboard  Internet  Other

Company Industry Category (Captains: The category chosen here determines your award eligibility so please choose carefully.)

<input type="checkbox"/> 1. Accounting	<input type="checkbox"/> 12. Consulting	<input type="checkbox"/> 23. Media	<input type="checkbox"/> 31. Rubber and Plastic Products
<input type="checkbox"/> 2. Advertising/Public Relations	<input type="checkbox"/> 13. Diversified Services	<input type="checkbox"/> 24. Metal/Metal Products	<input type="checkbox"/> 32. Running-Related
<input type="checkbox"/> 3. Aerospace	<input type="checkbox"/> 14. Employment Agencies	<input type="checkbox"/> 25. Motor Vehicles & Parts/Industrial Equip.	<input type="checkbox"/> 33. Technology
<input type="checkbox"/> 4. Airlines/Travel Related	<input type="checkbox"/> 15. Engineering/Architecture	<input type="checkbox"/> 26. Nonprofit/Education	<input type="checkbox"/> 34. Telecommunications
<input type="checkbox"/> 5. Apparel/Retailing/Textiles	<input type="checkbox"/> 16. Forest Products/Paper	<input type="checkbox"/> 27. Office Equipment/Computers/Electronics	<input type="checkbox"/> 35. Toys/Sporting Goods/Musical Instruments
<input type="checkbox"/> 6. Arts/Film/Video	<input type="checkbox"/> 17. Glass/Building Materials	<input type="checkbox"/> 28. Petroleum Refining/Crude Oil Products	<input type="checkbox"/> 36. Transportation/Railroad
<input type="checkbox"/> 7. Banking/Finance/Investments	<input type="checkbox"/> 18. Government	<input type="checkbox"/> 29. Publishing	<input type="checkbox"/> 37. Utilities
<input type="checkbox"/> 8. Beverages/Food	<input type="checkbox"/> 19. Health Related/Hospitals	<input type="checkbox"/> 30. Real Estate	<input type="checkbox"/> 38. Other _____
<input type="checkbox"/> 9. Chemicals/Soaps/Cosmetics	<input type="checkbox"/> 20. Hotels/Restaurants		
<input type="checkbox"/> 10. Communications	<input type="checkbox"/> 21. Insurance		
<input type="checkbox"/> 11. Construction	<input type="checkbox"/> 22. Legal		

**THIS IS HOW INDUSTRY AWARDS ARE COMPUTED.**

**Please read and sign:**

I/We acknowledge having read and agree to abide by all the rules, regulations, and procedures contained in this Kaiser Permanente Corporate 5K Run/Walk Registration Packet.

I/We certify that the listed participants presently meet the eligibility requirements as stated in the Kaiser Permanente Corporate 5K Run/Walk Registration Packet.

Team Captain Signature \_\_\_\_\_ Date \_\_\_\_\_

**Instructions if you are signing up via paper:**

1. If additional copies are needed, these forms may be duplicated. Keep a copy of all forms for your records.
2. Please alphabetize roster by last name and type each participant's name.
3. Submit original of the Company Registration Form, a Company Roster, and the original signed Release Form for each participant along with an entry fee check to 4651 Roswell Road, #I-802, Atlanta, GA 30342.
4. A bib number will be assigned to each participant and noted on this form. A copy of the form will be included in the Race Packet.
5. VISA, MasterCard, and American Express accepted.
6. Reminder: entry fees are non-refundable.

