

# 5K RUN/WALK

# 10K RUN

Race Begins & Ends At:

## SIMPSON PARK CHILLICOTHE, MO

7:30 am, May 28, 2018

- T-shirt for the first 100 registrants
- Water will be served along the race course
- Plenty of snacks, fruit and drinks will be available at the conclusion of the race

### AGE GROUPS:

- 14 & UNDER
- 15-19
- 20-29
- 30-39
- 40-49
- 50-59
- 60 & Over

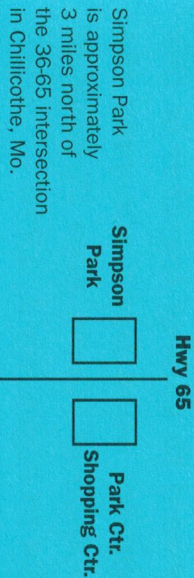
### AWARDS:

1ST & 2ND Place Medals will be awarded in each age group for the 5K and 10K runs. Trophies will be awarded to the over-all winner in the men's and women's 5K and 10K runs.

## All proceeds go to the

### North Missouri Fellowship of Christian Athletes In memory of Darin Bryan

(see reverse for more information)



### Contact Us

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CLIP ALONG THIS LINE

FOR OFFICE USE: ENTRY #

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

AGE DATE OF RACE \_\_\_\_\_ MALE  FEMALE

All donations that exceed the amount of the race fee is a tax deductible contribution to FCA.

MAKE CHECKS PAYABLE TO: North Missouri FCA

\$20 Pre-Registration P.O. Box 1073

\$25 Race Day Registration Chillicothe, MO 64601

*WAIVER: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risk associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release DB/FCA, the City of Chillicothe, Missouri, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.*

RACE: \_\_\_ 5K Walk \_\_\_ 5K Run \_\_\_ 10K Run

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature (if under 18 years) \_\_\_\_\_ Date \_\_\_\_\_

SHIRT SIZE (check one)

S  M  L  XL  XXL  XXXL

(add \$2 extra)