



Check-in starts at NOON.

Starting line is located at 219 N. Market St Mt. Carmel, IL

COSTUMES ENCOURAGED, BUT NOT REQUIRED.

Check one: Kids Fun Run (\$15) _____ 5K (\$30) Run _____ Walk _____

NAME: _____

Email: _____ **Phone Number:** _____

ADDRESS: _____

GENDER (circle one): Male Female Age: _____

T-shirt size (circle one): YXS YS YM YL AS AM AL AXL AXXL

ENTRY BY October 6th TO GUARANTEE A T-SHIRT ON RACE DAY

Waiver and Release of Claims: I understand that my consent to these provisions is given in consideration of the acceptance of this registration and for being permitted to participate in this event. I am a voluntary participant in this event, and in good physical condition. I know that this event is a potentially hazardous activity and I hereby assume full and complete responsibility for injury or accident which may occur during my participation in this event or while on the premises of this event, and I hereby release and hold harmless and covenant not to file suit against the Wabash County Chamber of Commerce, Wabash County, the City of Mt. Carmel and any affiliated individuals, any sponsor and their employees and all other persons or entities associated with this event from any loss, liability or claim(s) that may arising out of my participation in this event, including personal injury or damage suffered by me or others, whether the same be caused by fall, contact with participants, conditions of the course or any other cause. If I do not follow all the rules of this event, I understand that I may be removed from the competition.

Participant' Signature _____ **Date** _____

Parent/Guardian (if under 18) _____

MAIL REGISTRATION AND PAYMENT TO: 219 N. MARKET ST, SUITE 1A MT. CARMEL, IL 62863