



## Puckerbrush Days 5K & Kid's ½ Mile

Sat., July 15th, 2017 – Check-In begins at 6:30 AM Waldorf Univ., Salvesson Hall Front Porch  
(6th Street & J Street)

### Registration Information:

- 5K pre-registration fee: \$15.00
- 5K day of registration fee: \$20.00
- Kids' ½ mi. Run: \$3.00 per child registration fee

### 5K information:

- 5K Check-in/Package Pickup: 6:30 - 7:20 AM
- 5K Race start: 7:30 AM
- Race Day item (Buff) will be provided to all 5K entrants
- Awards for overall open male/female finishers and remaining top two finishers in each age group beginning at 8:15 am:
  - 15 & Under, 16 - 19, 20 - 29, 30 - 39, 40 - 49, 50 - 59, 60 - 69 & 70+

### ½ mi. information:

- Check-In: 7:45 - 8:00 AM, Run start: 8:00 AM
- Age: 12 and younger, All children that finish will receive a medal
- Course is a relatively flat square  
PARENTS ARE WELCOME TO ACCOMPANY THEIR CHILDREN

### Registration Form:

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Gender (circle): M F Age 7/15/17: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Race Waiver: I, individually, (and/or as parent, and/or guardian of the named minor) for and in consideration of acceptance of this entry in the aforementioned event, do hereby release, remise, waive, and forever discharge the Forest City Puckerbrush Committee, Chamber of Commerce, Waldorf University and all other supporting groups of this said event, together with all their officers, agents, officials and employees, from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of, or relating to injury, illness, loss, or damage, including death, relating to participation in aforesaid event. I further state I am in proper physical condition to participate in this event. In addition, I agree that my participation in this event recommends that I will not participate with roller blades, skateboard, animals, or anything that the race director deems dangerous to myself or other participants and that the event director may remove me from this event. I further grant permission to this event and the organization conducting the event and/or agents authorized by them to use any photographs, videotapes, motion picture, and recordings of this event for any purpose. I also agree that if the event is cancelled for any reason or I am unable to participate that all entry fees are non-refundable and each entry is non-transferable.

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

Parent or Guardian if under 18

**Mail Checks to: Kathy Rollefson - Forest City Chamber of Commerce , 145 South Clark St.,  
PO Box 306, Forest City, IA 50436 [kathy@forestcityia.com](mailto:kathy@forestcityia.com)**