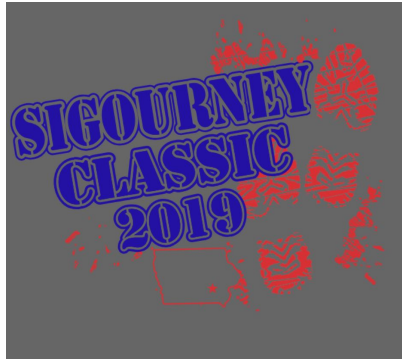


Sigourney Classic 5K-1 Mile

Date: Thursday, July 4, 2019
Time: 8:00 a.m. – 5K run
8:05 a.m. – 1 Mile run/walk
8:45 a.m. – Awards



Race Day Registration: 6:45 a.m. to 7:30 a.m., outside of Keokuk County Courthouse
Packet Pick Up: Thursday, July 4, Sigourney Downtown Square, 6:45 a.m. to 7:45 a.m.

Place: Start and finish on northside of Sigourney downtown square, in front of Keokuk County Courthouse. The courses are relatively flat and on paved residential streets.

Awards: Plaques are given to the overall winners in each race. Overall winners are not eligible for age division medals. Three medals are given to each age division, male and female.

Fee: \$20 for 5K and 1 mile **before** June 15
\$25 **after** June 15
\$30 day of race

5K: 15& under, 16-19, 20-29, 30-39, 40-49, 50-59, 60 and over.

1 Mile: 6 & under, 7-9, 10-12, 13-15, 16-19, 20-29, 30-39, 40-49, 50& over.

Send Registration to: Sigourney Classic 5K
PO Box 51
Sigourney, Iowa 52591

Please, one person per entry form only!

One 18 speed bike will be given away from among all official entrants at 7:50 a.m. **Must be present to win!**

Checks payable to: Sigourney Classic 5K

Questions: Contact Charlie Comfort at 641-672-4196 (cell) or e-mail sigourneyclassic5K@gmail.com

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Sigourney Classic 5K-1 Mile Entry Form- Thursday, July 4, 2019
Entry fee is non-Refundable

Name: _____
First Name Last Name

Address: _____
Street City State Zip Code

AGE on race day _____ E-mail: _____ Phone: _____

- MALE
- FEMALE

“Register before June 21st to guarantee a t-shirt”

- \$20- Before June 15 (early-bird)
- \$25- After June 15
- \$30 Race Day

	Race
_____	5K
_____	1 Mile

T-SHIRT SIZE		
Youth:	Adult:	
___ S	___ S	___ XL
___ M	___ M	___ XXL
___ L	___ L	___ XXXL

In consideration of the acceptance of my/my child's entry, I for myself or for my child, do hereby release and discharge the organizers of this walk/run and all other sponsors and organizers of all claims and damages, actions whatsoever in any manner arising out of my/my child's participation in this event. I attest and verify that I have full knowledge of the risks involved in this event and I am/my child is physically able to participate in this event. Further, I grant full permission to any and all partners of the Sigourney Classic to use my/my child's name, photographs, videotapes, or any other recording of this event for any legitimate purpose without compensation.

Signature: _____ Parent/Guardian (If under 18): _____

Date: _____