

GEORGE BALLARD MEMORIAL 10K, 5K RUN & 2 MILE WALK

THOMAS MITCHELL DAYS, MITCHELLVILLE, IOWA

SEPTEMBER 15, 2018

8:00 A.M.

SPONSORED BY MITCHELLVILLE FAMILY CHIROPRACTIC

For years Mitchellville resident, George Ballard, helped to organize this event as part of the Thomas Mitchell Days celebration. This is the 15th year we have chosen to honor George's life by having this event in his name and a new 10K event has been added! Please join us for a fun event honoring the life of one who we continue to miss dearly. 10K run will be from City Park to Thomas Mitchell Park and back along hard surface roads.

Start/Finish: City Park, 2nd and Oak Ave NE

Course: All paved roads with a few rolling hills

Awards for runners: Women and men overall (5K)

First and second place in each 5K age group for 5K

Women and men overall 10K

Age groups for runners:

13 and under, 14-19, 20-29, 30-39, 40-49 , 50 and over

Awards for walkers: First and second in 2 mile walk (no age group divisions)

Registration Fee:

Runners: \$10.00 not including shirt \$20.00 includes performance shirt-**Must register by Sept. 3**

Walkers: \$10.00 not including shirt \$20.00 includes performance shirt-**Must register by Sept. 3**

Pre-register by mail or on race day from 7:00-7:45 a.m.. Those registering on race day will not receive a shirt. **Anyone wanting a shirt, must have registration in by Sept. 5th.**

Make checks payable to Thomas Mitchell Days, George Ballard Run

Mail checks and registration form to:

Kristy Ballard

645 Strathmoor Dr.

North Liberty, IA 52317

ENTRY FORM:

Please use back or another sheet if registering for more than one;

Name _____ Event I'm participating in 5K _____ 10K _____ Walk _____

Address: _____ City _____ Zip _____ Gender M F

Phone _____ Age on 9-15-18 _____ **E Mail** _____

RUNNERS: Yes I want a shirt size Adult S M L XL 2X 3 X (2x and 3x \$2.00 extra) I do not want a shirt _____

Walkers: Yes I want a shirt size S M L XL 2x 3x (2x and 3x \$2.00 extra) I do not want a shirt _____

Waiver: I hereby, for myself, my heirs, my executors, administrators waive all rights and claims for damages I may have against individuals, and it's agencies associated with this event, representatives, successors and assigns for any all injuries suffered by me in conjunction with said event. I attest that I have full knowledge of the risks involved in this event and am physically fit to participate.

Participant Signature: _____ Parent signature if under 18 _____