



# Friends of Pilot Knob Trail Race 2019

## 5K/10K Trail Run/Walk

Saturday, September 14, 2019, Race Start: 8:00 am

### Entry Fee

\$25 before Sept 1

\$30 Sept 1 - race day

Entries received before Sept 1 are guaranteed a t-shirt. T-shirts may not be available for entries received after Sept 1.

### Award Divisions

5K /10K Overall male and female  
19 years and younger

20-29                      30-39

40-49                      50-59

60+

Awards given to the top finisher in each division.

### Race Information

Race begins at 8:00 am on Sept 14, 2019 at Pilot Knob State Park.

Registration at the Stone Shelter begins at 7:00 am.

Refreshments served after the race.

Proceeds and Donations benefit the Friends of Pilot Knob.

### PLEASE MAIL ENRTY FORM TO:

Friends of Pilot Knob, c/o Dawn Bill, 1516 7th Ave N, Clear Lake, IA 50428

Method of Payment:  Check  Cash  paypal.me/pilotknob

cc # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ exp \_\_\_\_\_ / \_\_\_\_\_ CVC \_\_\_\_\_

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

Make checks payable to: Friends of Pilot Knob.

Race forms are also available on Facebook: Friends of Pilot Knob

Or register online at [www.eventbrite.com](http://www.eventbrite.com) search for Friends of Pilot Knob Trail Race 2019

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: M F \_\_\_\_\_

Address: \_\_\_\_\_

T-Shirt Size: S M L XL XXL \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

### **Emergency Contact Information**

Name: \_\_\_\_\_

Phone 1: \_\_\_\_\_

Phone 2: \_\_\_\_\_

### **Waiver of Liability and Consent to be Signed by Contestant:**

In consideration of my acceptance of the entry, I hereby, for myself, my heirs, executors, and/or administrators, waive any and all rights and claims for damages I may have against individuals associated with Friends of Pilot Knob, State of Iowa DNR, all sponsors,, officials, representatives, successors and assignees for any and all injuries suffered by me during, because of, or in travel to or from the event. I attest and verify that I have full knowledge of the risks involved in this event, and I am physically fit and sufficiently trained to participate.

Signature \_\_\_\_\_

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

Parent or guardian must sign if participant is under 18 on race day