

Adams County 10k Challenge

Friday, July 6, 2018

7:00pm start

Challenge Series Participants can participate for free and earn 7 points by completing this race.
Go to <http://www.adamscounty5kchallenge.com> to register for the entire 13 race series.

Race Location: Adams Memorial Hospital -- 1100 Mercer Avenue, Decatur IN 46733
Mail registration forms to: Jeannie Smith
7257 N 100 E, Decatur IN 46733

Entry Fees: Pre-Registration (by 3pm on June 22) \$20.00 includes a T-Shirt.
Race Day Registration \$20.00 Includes a T-Shirt while supplies last.
Packet Pick-up & Race day registration is 6:15 to 7:00pm.
Strollers are welcome. NO PETS ALLOWED.

Awards: Awards given to top Male & Female Runners - Awards for top 3 in each age group & gender.

Age Groups: 14 & Under, 15-18, 19-29, 30-39, 40-49, 50-59, 60-69, 70+

Course Description: Race will be run on the River Greenway.

Chip Timing: The race will be chip timed with results posted on the Adams County 5k website

-----Cut along line and return -----
ENTRY FORM & WAIVER OF LIABILITY MUST BE SIGNED IN ORDER TO PARTICIPATE

PLEASE PRINT **Make Checks Payable to: AC Challenge** **Pre-registration deadline: June 22**

Name: _____ email: _____

Address: _____ Phone: _____

City: _____ State: _____ ZIP: _____ Birth date: ____/____/____

Age: _____ Gender: (please circle) Male / Female

Shirt Size: (please circle) ADULT: S M L XL 2XL YOUTH: S M L

RELEASE AND INDEMNIFICATION - READ BEFORE SIGNING: The signing of this entry blank and the participation in the Adams County 10k Challenge is with full knowledge of the risks involved therein and the undersigned individually and/or as parent or guardian assumes the risk of injury, sickness or health defect including death, resulting from or received during participation in the race, and further releases and agrees to save harmless the Adams County Challenge, its committees and sponsoring and assisting agencies and individuals from any liability, damage, claim or judgment that may result from or arise out of the participation of the participant in this race.

Signature: _____ **Date:** _____

Entry blank must be signed by the participant

Signature (Legal Guardian): _____

If Participant is under 18 years of age, the signature of a legal guardian is required.