

ARCADIA DAZE 5K RUN

9:00 AM JULY 23, 2016

Custom medals to 1st, 2nd and 3rd places. Custom awards to overall male and female winners.

Registration/check-in is at Finch Park Pavilion, across from Township Hall. Race starts PROMPTLY at 9:00 AM. Starting point is ½ mile East of registration, please plan accordingly! Have a great run!

Entry Fee Schedule:

Pre-registration with T-shirt by July 20th \$15.00 Without T-shirt \$10.00

Race day registration with T-shirt if available \$20.00 Without T-shirt \$15.00

Race day registration starts at 7:30 AM

MAKE CHECKS PAYABLE TO: ARCADIA LIONS CLUB, Mail to: Jan Hopwood, P.O. Box 169, Arcadia MI 49613-0169.

Questions: Call 231-889-4738 or Email jb_hopwood@yahoo.com Free snack and water for race participants at the park after the race. Please print

First name _____ Last name _____

Address _____ City _____

State/Zip _____ Phone _____

Email _____

T-shirt size S M L XL Sex: Male Female Age on race day _____

Circle age group 11-under 12-13 14-15 16-17 18-19 20-24 25-29

30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70- over

Amount enclosed \$ _____ Feel free to make copies of this form.

ARCADIA DAZE RUN WAIVER

I KNOW PARTICIPATING IN A FOOT RACE IS A POTENTIALLY HAZARDOUS ACTIVITY. I SHOULD NOT ENTER UNLESS I AM MEDICALLY ABLE. I ASSUME ALL RISK ASSOCIATED WITH PARTICIPATION IN THIS EVENT, INCLUDING BUT NOT LIMITED TO: FALLS, CONTACT WITH OTHER PARTICIPANTS, THE EFFECTS OF THE WEATHER, TRAFFIC, AND THE CONDITIONS OF THE ROADS, WITH ALL SUCH RISKS BEING KNOWN AND APPRECIATED BY ME. HAVING READ THE WAIVER AND KNOWING THESE FACTS, AND IN CONSIDERATION OF YOU ACCEPTING MY ENTRY, I, FOR MYSELF ANYONE ENTITLED TO ACT ON MY BEHALF, WAIVE AND RELEASE THE ARCADIA LIONS CLUB, AND ALL OTHER SPONSORS, THEIR REPRESENTATIVES AND SUCCESSORS FROM ALL CLAIMS OF LIABILITIES OF ANY KIND ARISING OUT OF MY PARTICIPATION IN THIS EVENT. I GRANT PERMISSION TO ALL OF THE FOREGOING TO USE ANY PHOTOGRAPHS, MOTION PICTURES, RECORDINGS OR ANY OTHER RECORD OF THIS EVENT FOR ANY LEGITIMATE PURPOSE.

Signature _____ Date _____

Parent signature if under 18 years of age

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