



August 21st 2016
Downtown Barrington

Start Times:
8 AM – Registration
9 AM - 5k Run/Walk

Proceeds of the 2016 race will support Misericordia-Heart of Mercy, a home with support services for people with developmental disabilities, located in Chicago, IL.

Please mail or drop off to: 23507 N. Summit Dr. Barrington IL 60010

Questions? - Call- (224)-210-3497 or email: chilidumprun@att.net

First Name: _____

Last Name: _____

Address: _____

Age: _____ Phone _____ E-Mail _____

Sex: Male / Female \$25 Run/Walk by Aug 1st \$20 Children 12 and under \$30 **after Aug 1st**

Event (circle one): 5k Run 5k Walk T-Shirt Size: S M L XL No Shirt (keep as donation)

Optional Additional Donations: \$ _____ for **Misericordia**

Total money enclosed \$ _____ Make checks payable to: **Breakfast Rotary Charitable Foundation**

Waiver (Must be signed)

Whereas, the undersigned desires to participate in the **Chili Dump Run** (hereinafter the “**Race**”) and understands that running and/or walking a race is a potentially hazardous activity. I declare that I am medically fit enough to participate in the Race and that I assume all risks associated in running and/or walking this event. I assume full responsibility during and after the **Race** for my choice to participate and

(Please Print), I, _____, understand and affirm that participation is at my own risk, and I hereby for myself, heirs, executors, and administrators waive any and all claims I may have against the Chili Dump Run Planning Committee, their officials, subsidiaries, affiliates, agents, organizers, sponsors and volunteers, for any and all liability for bodily injury or any other damage or loss that I may suffer as a result of my participation in the **Race**, including pre and post-race activities. I realize that this release is complete and absolute and that this release constitutes a complete waiver of any claim, which I might otherwise possess as a result of any accident, injury, or property damage and the consequences thereof in connection with this **Race** . I understand that this release is a condition to participate in the **Race**.

Signature of Participant _____ Date _____

Signature of Parent or Guardian _____ Date _____

(If entrant is under the age of 18)