



# EDWARDSVILLE YMCA SPOOKTACULAR FAMILY RUN/WALK

**Saturday, October 11<sup>th</sup>, 2014**

**Race Begins At 8:00am, Doors Open At 7:00am**

**Registration Begins September 5<sup>th</sup>**

**Sign Up For Either A 5K Run Or A 2 Mile Family Fun Walk/Run For All Ages And Fitness Levels.**

**Every Registered Participant Will Receive A T-Shirt\* And Participation Medal!**

**\*Register Before October 1<sup>st</sup> To Guarantee A Shirt**

**WEAR YOUR MOST SPOOKTACULAR COSTUME!**

**5K Run**

**\$25 (\$30 after Oct. 1<sup>st</sup>)**

**2 Mile Family Fun Walk/Run**

**\$20 (\$25 after Oct. 1<sup>st</sup>)**

**Start and finish at the Edwardsville YMCA Esic Center.**

**The course is mostly on paved bike path = flat and family friendly.**

**After the race we will have snacks, a bounce house for the kids and a costume contest for the best kid, adult and family!**

**Final Lap Race Management will be providing timing services for the 5K event!**

**You can register online at [www.finallapracings.com](http://www.finallapracings.com) or at Esic or Meyer Centers.**

**For more information, contact Dawn Peterson at  
618-656-0436 or [dpeterson@edwymca.com](mailto:dpeterson@edwymca.com).**

**[www.edwardsvilleyymca.com](http://www.edwardsvilleyymca.com)**

**In Partnership  
with the  
Goshen Rotary  
Club**



# Spooktacular Registration Form

(ONE FORM PER PARTICIPANT)

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Email: \_\_\_\_\_

Which Event You Are Participating In: \_\_\_\_\_ 5K • \_\_\_\_\_ 2 Mile Fun Walk/Run

T-Shirt Size: Adult Sizes: \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ 2XL • Youth Sizes: \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ L

In consideration of acceptance of my entry to participate in the Edwardsville YMCA Spooktacular Family Run/Walk, I do hereby release & discharge the Edwardsville YMCA, the City of Edwardsville, Madison County Transit, Final Lap & their employees & volunteers from any and all liability to me, my assigns, heirs, executors, & personal representatives, now & forever, for any casualty to myself or my property arising from my participation therein. I hereby attest that I have full knowledge of the risks associated with my participation in the activities associated with this event & that I am physically trained & fit for participation in all such activities. I give my consent for the Edwardsville YMCA to use my photo likeness in future print &/or electronic publications.

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

Parent's Name (if under the age of 18): \_\_\_\_\_



## For Staff Use Only

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Codes: Spooktacular 5K: 1HW5KSPOOK • Spooktacular 2 Mile: 1HW2MSPOOK