



Presented by



DATE, TIME AND LOCATION

Friday, April 10, packet pick-up/donation drop-off noon to 5:30 p.m.
Saturday, April 11, at 10 a.m., registration begins at 8:30 a.m.
Packet pick-up and race will be at:

Studebaker Park Pavilion, 1020 McDonald St., Elkhart, IN

REGISTRATION

Walk in/mail to Andrew Hershberger - CAPS
1000 W. Hively Ave., Elkhart, IN 46517

Online at bit.ly/CAPS5K. Last day for online registrations is April 8.
Deadline for registrations with shirt orders is April 1.

FEES

Chip timed 5K run/walk

- \$25 per adult (age 14+) with T-shirt
 - \$20 per team member (minimum four per team) with T-shirt
 - \$15 per child (age 5-13)
 - Optional \$25 donation to Adopt a Runner from a CAPS program
- Sidekicks 300m kids/family fun run is free**

AWARDS

Top 3 overall M/F, best costumes, highest total donations collected for CAPS by a super team

FOR MORE INFORMATION

Paula Turk at 574-293-1683 (Stone Soup Promotions) or Andrew Hershberger at 574-295-2277 (CAPS)

PULL your favorite cape out of storage, don your masks and get ready to be a superhero for kids!

Run a 5K cross country style course at Studebaker Park Pavilion in Elkhart in your favorite superhero (or villain) costume.

Registration fee includes chip timing, a T-shirt and a post-race celebration with food, drinks and awards.

BE A SUPER TEAM!

Form a group of four or more and collect donations for CAPS. Your team is responsible for collecting checks and donations, to be turned in when you pick up your race packets. The team with the highest total donations collected before the race will win a special award!

2015 CAPS SUPERHERO 5K ENTRY FORM

Which race will you run? (Check one)

5K run 5K walk Sidekicks 300m run

Participant _____

Phone number _____

Age on race day (April 11, 2015) _____ Gender _____

Email _____

Address _____

T-shirt size (adult or child sizes available) _____

City/State/ZIP _____

How did you hear about this race? _____

Emergency contact/phone number _____

Are you part of a team? Yes No

Check this box if you are interested in Adopting a Runner

Team name (if applicable) _____

I am unable to attend the race but would like to make a donation of \$ _____ to CAPS.

RACE WAIVER: (Please read carefully) I know and understand that running a cross-country race is a potentially hazardous activity. I should not participate in this or any other race unless I am medically able and properly trained. I knowingly undertake these risks. I understand and assume all risks associated with running in this event including, but not limited to: falls; contact with other participants; the effects of the weather, including cold, snow, and/or ice; and conditions of the trail. I hereby release and discharge the City of Elkhart, the City of Elkhart Parks and Recreation, Child And Parent Services, its officers, employees, agents, and assignees, including all sponsors, their representatives and successors (collectively, "hosts"), from any and all claims and liability whatsoever for all loss, damages, claims, demands, causes of action or suits of any kind arising out of my participation in this event. I further agree not to bring any claim or suit, whether in law or in equity, against the hosts arising in any way out of my participation in this event. Furthermore, I grant permission to all of the foregoing to use any photograph, motion picture, recording or any other record of this event in which I may appear for any purpose. I have read and understand this form.

Participant signature _____

Date _____

Parent or guardian signature (if participant under 18 years of age) _____

Date _____