

St. John the Baptist Catholic School

6th Annual

Run, Rudolph, Run

5K Run and 1.5 Mile Fun Walk

- Awards for Top Overall Male & Female and 3 Deep in the following age group (5K only): 13 & under, 14-19, 20-29, 30-39, 40-49, 50-59 and 60+; award presentation immediately following at St. John Catholic School
- Awards for the Best Holiday Costume
- Shirts, Drinks and Snacks for participants

Registration Fees:

5k Preregistration \$25

5K Day of Event \$30

1.5 Mile Preregistration \$15

1.5 Mile Day of Event \$20

* Registration forms must be received by 11/07/17 to ensure T-shirt

Packet Pickup:

Thurs 11/16 4:00 pm – 6:00 pm
St. John the Baptist Catholic School
Cafeteria

Fri 11/17 4:00 pm – 5:45 pm
St. John the Baptist Catholic School
Cafeteria

Red Bud Chamber of Commerce
Lighted Parade will start at 8:00 pm
Downtown Red Bud

St. John the Baptist Catholic School
519 Hazel Street
Red Bud, IL 62278
Phone: 618.282.3215
E-mail: runrudolphrun5k@gmail.com

Friday, November 17, 2017

Start Time: 6:00 pm

Where: St. John the Baptist Catholic School
4th Street and Hazel Street
Red Bud, Illinois

On-line Registration at:

<https://runsignup.com/Race/IL/RedBud/RudolphRun5K>

For more race information please go to:

<http://supportsjb.weebly.com/run-rudolph-run.html>

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Run Rudolph Run 5K Run and 1.5 Fun Walk Registration Form

Please return this portion and a check payable to SJB to:

St. John the Baptist Catholic School Attn: 5K Run 519 Hazel Street Red Bud, Illinois 62278

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____ Age day of race _____ Sex: M F

Event: 5K 1.5 Fun Walk (Walker 1.5 route only)

T-Shirt Size: Youth t-shirt S M L
Adult t-shirt: XS S M L XL XXL

Please circle: Cotton Dri-Fit (\$5.00 extra)

I knowingly and at my own risk I do hereby apply to enter an athletic contest. By signing this registration form I hereby agree that I, on behalf of myself and my heirs, agree to hold harmless St. John the Baptist Catholic School, St. John the Baptist Catholic Church, Red Bud Chamber of Commerce, and the City of Red Bud and all affiliates for my health, safety, injury, disability, or death arising from or resulting from participating in this event. I hereby give permission for all photos and information be used for any legitimate purposes.

Signature: _____ Date: _____

Parent/Guardian Signature if under the age of 18

For office use only: Date Rec'd _____ Runner No _____

Cash or Check No _____ Amount _____