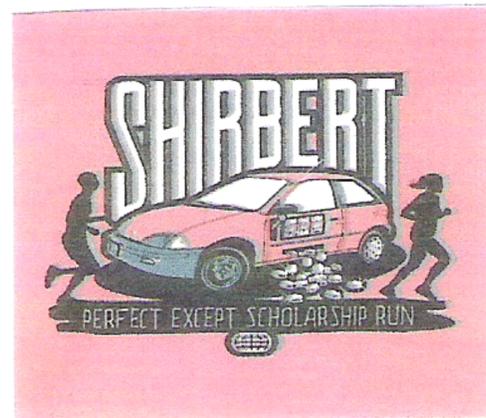


PERFECT EXCEPT SCHOLARSHIP RUN/WALK



When: SATURDAY, SEPTEMBER 17, 2016
Location: FARLEY PARK, FARLEY, IA
Registration: 8:30 A.M.
RACE START: KIDS RUN 9:00 a.m. 5K RUN/WALK TO IMMEDIATELY FOLLOW

** In order to guarantee a t-shirt at registration, forms need to be turned in by Sept 1, 2016

Cost: \$25 includes t-shirt if registered by Thursday September 1 or
\$15 per person no t-shirt

Sponsored by Team Shirbert In Memory of Gibber and Shirl Rave

All proceeds given to high school scholarships

Perfect Except Scholarship 5K Run/Walk Registration Form

Saturday September 17, 2016

Return forms and payment to: Kathy Rave
619 E 3rd St
Earlville, IA 52041-9607

PLEASE MAKE CHECKS PAYABLE TO: PERFECT EXCEPT FUND

NAME _____ AGE _____ GENDER M or F

ADDRESS _____

street city state zip

T-SHIRT SIZE: SM MED LG XL 2XL* 3XL* YS YM YL YXL *2XL or 3XL add \$2.00

I recognize that competing and participating in a road race is a potentially hazardous activity. I have read the race flyer and am familiar with the course, procedures, and rules. I should not enter and run unless I am medically able to participate and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participation in this event, including but not limited to: falls, contact with other participants, the effect of the weather, including high heat and/or humidity, traffic, and the conditions of the road and/or route, all such risks being known and appreciated by me. As a participant in this event, I hereby give the right and permission to Team Shirbert to use recorded voice and photographic images through any medium. I waive my right to inspect or approve the finished copy, images, or printed matter that may be created in conjunction with the event for any fundraising or promotional purpose. Having read this waiver and release and knowing these facts, I understand that by signing this waiver and release I, for myself and anyone entitled to act on my behalf, waive and release Team Shirbert and their affiliates, representatives, sponsors, volunteers, vendors, City of Farley and others connected with these events and their successors from any and all claims or liabilities of any kind arising out of my participation in the PERFECT EXCEPT event, even though that liability may arise out of the negligence or carelessness on the part of the persons putting on this event. My signature below indicates that I understand, accept, and agree to this waiver and release.

SIGNATURE: _____ DATE: _____

(IF UNDER 18 YEARS OF AGE YOU MUST HAVE A PARENT/GUARDIAN SIGNATURE)