8th Annual Race Fundraiser to Benefit Meals 'til Monday

Excepting Hunger on the Run

Saturday October, 28, 2017 at Elida Elementary School

8:00 a.m.Onsite Registration/Check In Begins

9:00 a.m.Half Marathon Begins

9:05 a.m.5k Begins

ENTRANCE FEES (Include post race lunch & chip timing. Shirts only guaranteed for early entry.)

*Meals 'til Monday purchases one sack of food with 6 meals for the weekend for \$3.50.

PACKET PICK-UP

Friday, October 27, 2017 at Elida Elementary School 4:30 p.m. - 6:00 p.m. Saturday, October 28, 2017 at Elida Elementary School 8:00 a.m. - 8:45 a.m.

AWARDS GIVEN

For top 3 overall male & female and by age divisions

REGISTRATION

Mail completed form below with check payable to Meals 'til Monday to: PO Box 3072, Elida, OH 45807 or register online at www.cantstoprunningco.com.

If you have any questions, please call 419-303-5892 or email MealstilMonday@yahoo.com.

ii you nave any questi	ons, piease can +19-505-50	92 or errian wea	istilivioriday@yarioo.com.	
	Meals 'til Monday 201'	7 Official Entry For	m (<u>Please Print)</u>	
	Please circle one:	5k	Half Marathon	
NAME:		· · · · · · · · · · · · · · · · · · ·	AGE ON RACE DAY:	CIRCLE: M F
ADDRESS:		CITY:	STATE:	ZIP:
PHONE NUMBER:	E	MAIL:		
TECH SHIRT SIZE: S M	L XL XXL (*only guarantee	ed if registration po	ostmarked by September 30, 2	2017)

UNSIGNED OR INCOMPLETE ENTRY FORMS WILL NOT BE ACCEPTED • NO REFUNDS FOR ANY REASON

Waiver must be signed. I acknowledge participation in a road race is a potentially hazardous activity and may result in various types of injury. I will not enter the October 28, 2017 Meals 'til Monday 5K & Half Marathon Race unless I am medically able. I assume all risks associated with this race, including but not limited to falls, contact with other runners, illness, and effects of the weather. I acknowledge and accept the risks of injury associated with participation in and transportation to and from this event. If I should suffer injury or illness, I authorize the officials of the race to use their discretion to have me transported to a medical facility, and I take full financial and legal responsibility for this action, whether such injury or illness arises out of the negligence of the event sponsor, the participants, or otherwise. I grant permission to Meals 'til Monday use any photographs, videotapes, or any other record of this event for legitimate purposes of the event or their organization. Knowing this, I am entering this event at my own risk.

SIGNATURE	DATE	GUARDIAN (if entrant under 18)	
EMERGENCY CONTACT PERSON NAME & PHONE # _			