

The God Water Run for the Thirsty 5K Saturday, May 18th, 2019

Location: Redar Park, 1754 S. Park Avenue, Schererville, IN
Race Day Registration and Check-In: Begins at 7:30 AM
Race Start Time: 9:00 AM



Registration: Register online at RunSignUp.com or mail completed registration to Run for the Thirsty c/o Michelle Hoffman, 20055 S. Mallory Drive, Frankfort, IL 60423 to be received by May 14th. Make checks payable to "God Water".

Fee: \$25 prior to April 1st; \$35 all dates thereafter.

Technical t-shirt included and guaranteed only if registered on or before April 22, 2019.

Net proceeds benefit God Water (www.God-Water.org) and no refunds will be issued.

Course: Road race through the neighborhood east of Redar Park. Chip timed by T&H Timing.

Awards: Trophies to the top overall male and female finishers; Trophies to the top male and female Masters (40+) finishers; Medals to the top three in Male and Female Age Groups: 0-9, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70+

For more information, please email maryelizabethrobertson@God-Water.org

Entry Form

Name _____ Birthday _____ Gender _____

Address _____ City/State/Zip _____

Phone _____ Email address _____

How did you hear about our race? (Please be as specific as you can.) _____

T-shirt size (adult sizes only): please circle XS S M L XL 2X

Emergency Contact _____ Phone _____

In consideration of you accepting this entry, I, the participant, intend to be legally bound and hereby waive or release any and all rights and claims for damages or injuries that I may have against the Race Director, God Water, Town of Schererville, USATF, all of their agents assisting with the event, sponsors and their representatives and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed Medical Doctor. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above waiver.

Participant Signature

Date

Parent/Guardian Signature (if under 18 years of age)

Date