



November 1, 2014 Scrub Run

Registration Info

Adult (15+)

\$15 - Until October 15, t-shirt guaranteed

\$20 After October 15 including race day

t-shirts on a first come, first served basis on race day

Children All Children must be accompanied by an adult registration

\$8 - (Ages 6-14)

Free - (Ages 5 and Under) Child will receive a participation ribbon only

Family Rate (2 adults and 2 children ages 6-14)

\$40 - Until October 15

\$50 - After October 15 including race day

Team Registration

Teams must be a minimum of 5 persons to qualify for a team award. An unlimited number of members may be on a team; however only the top 5 runners will earn team points. Individual registration fees apply and members are eligible for individual awards.

All participants wearing scrubs and/or bringing canned goods will be entered into a prize drawing!

Strollers Welcome!

Race Day Registration - 8am

5K Scrub Run - 9am

One Mile Fun Run - 9:30am

Awards Ceremony - 10am

Location: Sullivan High School

1073 East Vine Street

Sullivan, MO 63080

RAIN OR SHINE EVENT

Awards

1st place will be awarded to male and female 5K runners in each of the following categories

10 and under, 11-15, 16-19, 20-29,

30-39, 40-49, 50-59,

60 and over

All 1 Mile Fun Run participants will receive a ribbon!

Make checks payable to the Sullivan Area Chamber of Commerce. Mail before Oct. 15 or deliver to the Chamber at #2 West Springfield, Sullivan, MO 63080 Register online at split-secondtiming.com

I will participate in the timed 5K RUN
 I will participate in the untimed 1 MILE FUN RUN/WALK
 I am a member of 5K team named: _____

FIRST NAME _____ LAST NAME _____ MALE _____ FEMALE _____

Address _____ Phone _____

City _____ State _____ Zip _____ Email Address: _____

AGE _____ (As of NOV 1, 2014) T-SHIRT SIZE (Please Circle) Adult Sizes: S M L XL XXL

Child Sizes: YS YM YL

Walk/Run Release: By signing this entry form, I for myself, my heirs assigns, executors and administrators, waive and release any and all right s and claims for damages, actions and causes of action against any and all sponsors or their representatives, successors and assigns any and all injuries suffered by me while participation in and traveling to and from said event. I also give permission for the free use of my name and /or picture in any broadcast, telecast, other account of this event and my physical competition in this event. I fully understand that the event involves strenuous physical activity and I acknowledge that I am physically fit and sufficiently trained to participate in the event.

Signature _____ Date _____