



Phelps Health

Proceeds Benefit



Phelps Health  
FOUNDATION



**Saturday, October 19, 2019 • Veterans Memorial Park | Rolla, MO**

Race Day Registration 8:00 AM / Race Start 9:00 AM

Online Registration: [phelpshealthsuperhero5k.itsyourrace.com](http://phelpshealthsuperhero5k.itsyourrace.com)

**Please return this form and registration fee(\*) to:**

Phelps Health  
Attn: Paul Hackbarth  
1000 West 10th Street  
Rolla, MO 65401

*\*Make checks payable to: Phelps Health Foundation*

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Registration Fee: Adult (ages 13 and over) \$25 / Includes free T-shirt and chip time  
Youth (ages 12 and under) \$15 / Includes free T-shirt and chip time  
Youth (ages 12 and under) FREE / No T-shirt and no chip time

Adult T-shirt size: S M L XL 2XL 3XL 4XL 5XL

Youth T-shirt size: XS (2/4) S (6/8) M (10/12) L (14/16) XL (18/20)

Extra shirts (\$15 youth size or \$20 adult size): \_\_\_\_\_

***\*Must register by September 27 to guarantee shirt***

**Release and waiver (Please read and sign)**

I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that, although police protection might be provided, there could be traffic on the course route; therefore, I assume the risk of running in traffic. I also assume any other risks associated with running this event including, but not limited to, falls, contact with other participants, and the effects of weather and conditions of the road. I understand I am solely responsible for my own safety while traveling to and from or participating in this event. Knowing these facts and in consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, address representatives successors or assignees from any and all claims of liability for death, personal injury, or property damage of any kind or nature whatsoever arising out of, or in the course of my participation. The release form and waiver extends to all claims of every kind or nature whatsoever, foreseen and unforeseen, known and unknown. The undersigned further grants full permission to use any photographs, videotapes, motion pictures, recordings, or another record of the event for any purpose. Minors will be accepted with a parent's signature.

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date