# "BOO" MILBY MEMORY 5K RUN/WALK BENEFITS

## ILLINOIS VALLEY

### Alzheimer's Group

SATURDAY AUGUST 20, 2022 8 AM AT NORTHWEST SCHOOL

Packet pickup @ YMCA Peru, Friday August 19th, 5-6pm Register online at *runsignup.com* through August 17th at 12am Paper registration available during packet pickup and

Day of race (no mailing in sign up sheets)

#### **Entry Fee: NO REFUNDS AND NO TRANSFERS**

\$25 before August 19th\$35 day of Race (No race day discounts)\$5 discount for Starved Rock Runners

Entries made payable to: Starved Rock Runners

206 S Linden St. Normal, IL 61761

Strollers welcome, walkers encouraged!!! PLEASE NO HEADPHONES

#### Check In: 6:45 AM, Start Time: 8:00 AM

#### Starts & Ends at:

Northwest School 229 O'Connor Avenue LaSalle, IL 6130 2 blocks west of Rt 351

Please Print Clearly

Name Citv State\_\_\_\_ Zip\_\_\_\_ Address Age as of August 13th \_\_\_\_ Gender M/F\_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_ Email Please Circle One: Unisex Shirt Size: S M L XL 2XL 3XL Ladies Shirt Size: S M L XL 2XL Youth Shirt Size: XS S M L I know that running a road race is a, potentially hazardous activity, I should not enter and run or walk unless I am medically able and properly trained. I agree to abide by any decision of a raceofficial relative to my ability to safely complete the run. I assume the risks associated with running this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and or humidity, the conditions of the road and traffic on the course, all such risks are known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your acceptance of my entry, I for myself and anyone entitled to act on my behalf, waive and release the Alzheimer's Group, the City of LaSalle, LaSalle Grade School District #122, The Starved Rock Runners LTD. and all sponsors, their representatives and successors from all claims or liability that may arise out of negligence or carelessness on the part of the persons named in this waiver, I grant permission to all the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. SIGNED: Parent or Guardian if Minor

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