

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

ILLINOIS VALLEY

Alzheimer's Group

SATURDAY AUGUST 19, 2023

**8 AM VFW 2325 Donahue St. LaSalle, IL 61301
(NEW LOCATION FOR RACE START)**

Packet pickup @ VFW 2325 Donahue St. LaSalle, IL 61301, Friday August 18th, 5-6pm

Register online at runsignup.com through August 16th at 12am

Race Day registration 7am-7:45am (08/19/23)

Limited t-shirts day of race

Entry Fee: NO REFUNDS AND NO TRANSFERS

\$30 before August 16th

\$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:

VFW 2325 Donahue St. LaSalle, IL 61301

Please Print Clearly

Name _____

Address _____ City _____ State _____ Zip _____

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 race official 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 _____

OFFICIAL USE ONLY

BIB#