



Navy Element MWR Booster Club

5k Fun-Run-Amok

Saturday 24 September 2011

This fund-raiser is to benefit the Navy Element Morale, Welfare, and Recreation Booster Club. All proceeds will go to the 2011 Navy Ball on October 15th at the Renaissance Hotel, Downtown St. Louis.

Location of Course:

O'Fallon Rock Springs Nature Park
1428 E 3rd O'Fallon, IL 62269

Date and Time:

Saturday September 24th 2011
Registration : 0800-0845
Start Time : 0900

Categories:

Men
Women

Entry Fees:

\$20.00: Pre-register before September 17th
\$25.00: Day of Race

Contact Information:

Petty Officer 3rd Class Jake Welch- jwelch5757@gmail.com (573) 703-1636

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Cut and Mail

Make Checks Payable to:

Navy Element MWR Booster Club

Mail to :

President John Tandy
Navy Element MWR Booster Club
211 North Street
Brighton, IL 62012-1069

Name: _____ **Address:** _____

City/State: _____ **Phone:** _____ **E-Mail:** _____

T-Shirt Size, Adult Size (Please Circle One) S M L XL XXL

Non-participant Donation

Disclaimer/Waiver of Liability: In consideration for your accepting my or my child's entry in the Navy Element Morale, Welfare, and Recreation Booster Club (the Club) 5K run, including the 5K walk, I, the undersigned, intending to be legally bound, waive and release for myself or my child, my heirs, executor and administrators, any and all rights and claims for damages, demands and any other actions that have resulted from my or my child's participation in the event, which I may have against the Club, members of the Club, officers of the Club, the City of O'Fallon Illinois, Saint Clair County Illinois, volunteer medical support, all participating sponsors and those entities' representatives, successors and assignees. I agree to hold these entities, and their agents, representatives, successors and assignees harmless from any liability including any and all injuries, to include death, that are suffered by me as a result of my participation in this event. I verify I have full knowledge of the rigors of this race and the risks involved in participation, and I am physically fit and have sufficiently trained to complete this event in good health. I realize medical support for this event will consist primarily of volunteer medical personnel prepared to administer first-aid type assistance along the race course and at the finish line. I hereby grant permission to the Club and its sponsors to use all information submitted in my or my child's application, and any photograph, videotape, motion pictures, recording and any other record of this event including pre-race and post-race publicity.

Signature: _____ **Date:** _____

(Participant or Parent if Under age of 18)