

FREEDOM 5K RUN/WALK



DATE: WEDNESDAY JULY 4TH, 2018

TIME: 7:30 AM

LOCATION: ACADEMY PARK IN GRANDVIEW, IOWA. RACE DAY REGISTRATION AND SHIRT PICK UP WILL BE ON THE EAST SIDE OF THE PARK STARTING AT 6:30 AM.

AWARDS: T-SHIRTS TO THE FIRST 130 ENTRANTS (WALKERS OR RUNNERS). MEDALS WILL BE AWARDED TO THE FIRST THREE PLACES IN EACH AGE GROUP CATEGORY.

DIVISION: MALE OR FEMALE – 15 & UNDER, 16 – 19, 20 – 29, 30 – 39, 40 – 49, 50 – 59, 60 & OVER.

ENTRY FEE: \$20 THRU RACE DAY. ENTRY FEE IS NON-REFUNDABLE AND WILL NOT BE REDUCED IF SHIRTS ARE NOT AVAILABLE.

QUESTIONS: Jean Bermel 563-299-5639

email: jeanbermel@iowatelecom.net

Mona Shoppa-McCulley 563-506-1322

email: monamcculley1322@gmail.com

Dell Wagner 563-299-3309

email: muscatinerunningclub@machlink.com

BREAKFAST: THE GRANDVIEW FIRE DEPARTMENT WILL BE PREPARING BREAKFAST WHICH ANYONE CAN PURCHASE BY THE SHELTER HOUSE FROM 7 TO 9 AM.

FULL DAY OF ACTIVITIES TO ENJOY!

MAKE CHECK PAYABLE TO: GRANDVIEW COMMUNITY CLUB

MAIL ENTRY FORM WITH PAYMENT TO:

Doug Wolf

P.O. Box 355

Grandview, IA 52752

PRINT NAME: _____

ADDRESS: _____

AGE: _____ GENDER: _____ PHONE: _____

EMAIL: _____

T-SHIRT SIZE: ADULT SM _____ M _____ LG _____ XL _____ 2X _____

In consideration of your accepting this entry, I, my heirs, executor and administrators, waive any and all rights and claims for the damaged against the director of the run, the Grandview Community Club, The Muscatine Running Club, and the City of Grandview for any and all liability arising from illness, injury, and damages incurred by me during, because of, or in travel to and from the event. I have read the entry information provided and certify that I have trained suitably for the event by my signature below.

Signature/ Parent or Guardian: _____ Date: _____