



St. Clair Rotary

5K RUN

Presented By: **Allstate**

Saturday, June 27, 2009

Race Starts at 8:30

Race Day Registration on site, beginning at 7:30

The COURSE: Paved city streets with hill at start (up) and finish (down).
Roads open to vehicle traffic during race.

Questions Please Call: (810) 329-2962 or email: stclairchamber.com

Entry Fees Please check a box _____

BEFORE June 20, 2009: \$15 No Shirt, \$20 Shirt, \$30 Tech Shirt
AFTER or day of race - \$20 No Shirt, \$25 Shirt

Mail Form To: 5K Run - St. Clair Chamber of Commerce
201 N. Riverside, P. O. Box 121 • St. Clair, Michigan 48079

** Make checks payable to Rotary Club of St. Clair. DO NOT SEND CASH.**

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Age (AS OF June 27): _____ **SEX:** Male Female

Phone: _____ **Email:** _____

T-shirt Size: M L XL

RACE RELEASE/WAIVER: In return for your accepting my entry, I, for myself, my heirs, and my personal representatives, waive and release any and all rights and claims I may have, now or in the future, against the St. Clair Rotary Club, the Riverview Plaza Association, the St. Clair City government, City of St. Clair Police Department, St. Clair Chamber of Commerce their affiliated companies and organizations, sponsors, and all of their officers, employees, representatives, volunteers, successors, and assigns, for any and all injuries, illnesses, losses, damages, or death in any way connected with my entry, traveling to and from or participation in the St. Clair Rotary Sesquicentennial 5K Run. I assume all risks associated with travel to and from the event and participation, including but not limited to falls, contact with other participants and vehicles, effects of the weather, and course hazards. I am aware that participation is strenuous and may be hazardous. I am physically fit and sufficiently trained to complete this event, and I agree to abide by all rules and by decision of a run official relative to my ability to safely complete the run. I authorize all above-named parties to use any photos, video, or other record of this event, for any purpose whatsoever, without any consideration due to me. I have read and fully understand this entire application.

Signature (parent or guardian if under 18) _____ **Print Name** _____ **Date** _____