

**5K Run/Walk  
Family Races  
Youth Races**



**RUN THE RACE 2017  
HEBREWS 12:1  
SATURDAY AUGUST 19th**

**REGISTRATION  
FORM**

**SATURDAY, AUGUST 19<sup>th</sup>, 2017 5K Run/Walk START TIME 8:30AM, REGISTRATION 7:30-8:15AM at Columbus High School Track on 4th Avenue**

See brochure for other race schedules.

**One form per person please**

\_\_\_\_\_  
Last Name First Name

\_\_\_\_\_  
Mailing Address City State Zip Daytime Phone Number

\_\_\_\_\_  
Age as of Aug 19, 2017 Male Female Email Address

5K Run  5K Walk  1 Mile  100 m. Dash  Family Medley Relay Race

Strollers are welcome in the races but please, no dogs, horses, or bicycles. You may run and walk if entered in the 5K run, but please, no running if you are registered in the 5K walk.

1 Mile Race, 100 yard Dash, and Family Medley Relay Race will take place after the 5K Run/Walk. Family Medley Relay Race is a race that involves all immediate family members. Each family entered will be running the same distance. Each member of the family will have a set distance to run (distances will be determined according to age and capability). An article (such as a baton) will be passed from the running member to the next member in line to run. The first family to finish the race will be the winning team.

Challenges: Church Challenge, Business/Team Challenge, Family Challenge,

Challenge Rules: All Challenges are open to adults and youth. You may be part of more than one Challenge. You must be registered as part of a Challenge. If part of more than one Challenge you must be registered for each individual Challenge. If you are not registered as part of a Challenge you will not be counted as part of the Challenge come race day. The winning Challenge category teams will be based on how many participants are registered not based on race times. Business/Team challenge is for either a business or a group of individuals that would like to put a team together.

**Please circle one:**

Church Challenge: **Yes No** Church Name: \_\_\_\_\_  
Business/Team Challenge: **Yes No** Business/Team Name: \_\_\_\_\_  
Family Challenge: **Yes No** Family Name: \_\_\_\_\_

Family Rate covers all registered races for that family. If you are not registered for Family Rate you do not receive family rate.

Registration Fee –Per Person	
<b>Early Bird</b> \$25 by July 15 <sup>th</sup>	\$ _____
\$30 July 16 <sup>th</sup> -July 24 <sup>th</sup>	\$ _____
\$35 after July 24 <sup>th</sup>	\$ _____
<b>*NO t-shirt after July 24th</b>	

Family Rate:	
<b>Early Bird</b> \$100 by July 15 <sup>th</sup>	\$ _____
\$125 July 16 <sup>th</sup> -July 24 <sup>th</sup>	\$ _____
\$150 after July 24 <sup>th</sup>	\$ _____
<b>*NO t-shirt after July 24th</b>	

<u>Register by July 24<sup>th</sup> to receive a t-shirt.</u>	
Adult Sizes:	
Small _____	Youth Sizes:
Medium _____	Small _____
Large _____	Medium _____
X-Large _____	Large _____

**Please mail this form, with registration fee, to SYC, P.O. Box 1148, Columbus, MT 59019. All checks should be made out to Stillwater Youth Center. Call (406)322-5440 if you have any questions. Or register at [www.stillwateryouthcenter.com](http://www.stillwateryouthcenter.com) via paypal.**

**ALL RACE PARTICIPANTS MUST READ AND SIGN:**

In consideration of the acceptance of this entry form and for being permitted to voluntarily participate in this event, I hereby assume full and complete responsibility for any injury or accident which may occur during my participation in this event, and I hereby release and hold harmless the sponsors and organizers of the Stillwater Youth Center "Run the Race" 2017 and their agents and employees, and all other persons or entities associated with this event from any loss, liability, damage, or claims I may have arising out of my participation in this event, including personal injury or damage suffered by me or others whether same be caused by falls, contact with other participants, conditions of the course, negligence of the parties involved or otherwise. I also hereby consent to permit, and accept full responsibility for emergency treatment in the event of injury or illness. I give my full permission to the parties involved to use my photograph, video, or other recordings of me that are made during the course of this event for any purpose.

\_\_\_\_\_  
Signature of Voluntary Participant If under 18, signature of Parent or Legal Guardian Date

Thank you for supporting the Stillwater Youth Center. All proceeds from race registration will go towards ministering to the youth of the Stillwater Valley at SYC. See [www.stillwateryouthcenter.com](http://www.stillwateryouthcenter.com) for more information.