

# 5K SPRING SHUFFLE

**SUNDAY, APRIL 15**  
**8:30 A.M. START**

**CENTENNIAL PARK'S RUNNING PATH**  
**1776 W. CENTENNIAL PLACE**



**Join us for a timed 5K run on a USATF-certified course!**

Runners and walkers are invited to join us Sunday for this timed race on Centennial Park's running path. 1<sup>st</sup> and 2<sup>nd</sup> place male and female finishers in each age group will receive an award. Age groups are as follows: 8-14 years, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 and older.

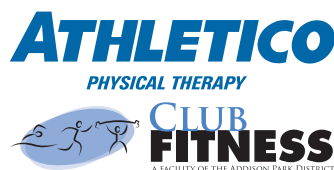
Each participant will receive a t-shirt and goody bag with a sports bottle and other premiums. Check-in time starts at 7:00 a.m. with the race starting at 8:30 a.m. Packet pick-up will be held on Saturday, April 14 between 9:00 a.m. - 3 p.m. at Club Fitness/Centennial Rec Center, 1776 W. Centennial Place in Addison.

Registration Fee: \$35 per walker or runner

**Register online at: [www.addisonparks.org](http://www.addisonparks.org)**

**Event day registration will be available.**

This event is sponsored by:



**B96 Street Team will be at the 5K Spring Shuffle giving away cool B96 swag... Walk, Run or just stop over to visit!**



# 5K SPRING SHUFFLE

## Registration Form:

### Registration Fees:

Early Bird Fee (before April 8): \$30

Regular Registration Fee (after April 9): \$35

Please return this form to the Addison Park District at  
Community Rec. Center, 120 E. Oak Street, or  
Centennial Rec. Center, 1776 W. Centennial Place.  
Forms may also be FAXED to: (630) 889-1991

Each person must complete a registration form and sign a waiver before participating in the run. The waiver **MUST** be signed by each participant.

Male  Female AGE on Race Day: \_\_\_\_\_ Adult T-shirt size: \_\_\_\_\_ Youth T-shirt size: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PAYMENT TYPE:  Cash  Check Amount: \_\_\_\_\_

### WAIVER:

As a participant (or parent/legal guardian of a participant under 18 years of age), I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss regardless of severity which or my charge may sustain as a result of participating in any and all activities connected with or associated with such program. I agree to waive and relinquish all claims I may have, as a result of participating in the program, against the Addison Park District. I do hereby fully release and discharge the Addison Park District from any and all claims from injuries, including death, damage or loss which may have or which may accrue to me or my charge on account of my or my charge's participation in the program. I further agree to indemnify and hold harmless and defend the Addison Park District, from any and all claims resulting from injuries, including death, damages and losses sustained by me or arising out of, connected with, or in any way associated with the activities of the program. In the event of any emergency or occurrence of illness or injury, I authorize the Addison Park District to secure from a licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services and/or medical emergency transportation costs that are provided, rendered or arise as a result of my or my charges participation and/or attendance at this event. I hereby consent to the use of my or my charges photograph and/or video in Addison Park District brochures, publications, media presentations or internet presence. I have fully read and understand the above waiver and release of all claims and permission to use photographs.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

(MUST be signed by a parent or legal guardian if participant is under 18 years of age)