

**3rd Annual
Marquette Catholic High School
5K Fun Run/Walk
Saturday, May 8th (8:00am)**

Where: Marquette Catholic

Time: 8:00 am

Please RSVP your spot by May 1st.

Entry Fees by May 1, 2010

- \$15 Student
- \$25 Adult
- \$60 Family

Add \$5 after May 1, 2010

Proceeds benefit Marquette Catholic High

Course:

Beautiful Midtown Henry St area

Starts and ends at Marquette!

Sponsored by:

Marquette Explorers Club

For more info or to register contact:

Meg Miller 463-0585

mmiller@marquettecatholic.org

NEW this year!

- **Dry fit shirts for all participants entered
by May 1st!**



PRIZES

1st, 2nd & 3rd place medals (male & female) for the following categories:

Pre-High School students

High School students

19-29 30-39

40-49 50-59

60 - 69 70 +

**Everyone Welcome!
Family friendly!
Bring the kids and
join in the fun!**

Mail form and entry fee to:

**Attn: Meg Miller
Marquette Catholic High School
219 East 4th Street
Alton, IL 62002**

Phone: 618-463-0585

Fax: 618-463-0582

Name _____
 Address _____
 Phone _____
 T-shirt Size: S M L XL XXL
 Sex _____ Age on race day _____
 E-mail _____

Waiver: In consideration of your accepting of this entry, I the undersigned, intending to be legally bound, hereby, for myself, my heirs, executor and administrators, waive and release any and all rights and claims for damages I may have against the City of Alton, MCHS or any sponsor or contributor to this event and their representatives, successors, and assigns for any and all claims or liability of any kind arising out of my training for and/or participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I agree to abide by any decision of a race official relative to my ability to safely complete this run I assume all risks associated with running in these events for including but not limited to falls, contact with other participants, the effects of the weather traffic and the conditions of the road. I attest and verify that I will participate in this event as a footrace entrant, that I am physically fit and sufficiently trained for the completion of this event. My physical condition has been verified by a licensed Medical Doctor. I acknowledge that the entry fee paid is non-refundable and nontransferable.

Signature

Date Signature of parent or guardian if under 18 years of age.

Date