

7th Annual Chillifest

5K Run/Walk

Saturday October 17th

9:00 a.m.

Southeast Corner of Square
Taylorville, IL.

Registration Fees

By September 23rd Deadline.....\$15
Day of Race.....\$18

Check-in and registration will take place next to the Start/Finish line on the Southeast corner of the Square from 7:45-8:45 am. The course will go south on South Main to the Manner's Park entrance, circling the park twice, before heading north on South Main to the Finish Line. Call Jerry at 287-2099 or 825-9661 with any questions.

ALL PARTICIPANTS MUST CHECK-IN ON THE DAY OF THE RACE

SHIRTS: THE FIRST 50 ENTRANTS WILL RECEIVE A CHILLIFEST T-SHIRT AND A LOGO WATER BOTTLE
THE TOP 3 FINISHERS IN EACH AGE GROUP WILL RECEIVE A STYLIN' HIGH GRADE RUNNERS WATER BOTTLE

ENTRY FORM

NAME _____
ADDRESS _____ CITY _____ STATE _____
TELEPHONE _____ EMAIL ADDRESS _____

T-SHIRT SIZE S M L XL (CIRCLE ONE)

PLEASE CHECK ONE RACE

MENS 5K

5K WOMEN

____ 18& UNDER	____ 55 – 59	____ 18& UNDER	____ 55 – 59
____ 19 – 30	____ 60 & OVER	____ 19 – 30	____ 60 & OVER
____ 31 – 40		____ 31 – 40	
____ 41 – 50		____ 41 – 50	5K WALK
____ 51 – 54		____ 51-54	____ M&W ALL AGES

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Be aware that in signing up and participating in this activity you will be expressly assuming the risk and liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor/ward might sustain as a result of participating in any and all activities connected with and associated with this race. I recognize and acknowledge that there are certain risks of physical injury to participants in this activity and I agree to assume the full risk of any and all injuries, damages or loss regardless of severity, that my minor/child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor/child/ward may have (or accrue to me or my child /ward) as a result of participating in this program/activity against the Taylorville Park District, Taylorville Greater Chamber of Commerce, and Chillifest Committee, including but not limited to its' officials, agents, volunteers and employees. I have read and fully understand the above information, warning of risk, assumption of risk and waiver and release all claims. I understand that the race committee may remove any individuals from the race for unsportsmanlike behavior and will forfeit entry fee.

PARTICIPANTS NAME _____ DATE _____

PARTICIPANTS SIGNATURE _____

(18 YEARS OR OLDER OR PARENTS/GUARDIAN)

MAKE CHECKS PAYABLE TO THE GREATER TAYLORVILLE CHAMBER OF COMMERCE

MAIL TO: JERRY LOWRY RE: CHILLIFEST 5K RACE

2308 Eastwood Drive Taylorville, Illinois 62568