

14th Annual Sauerkraut Days
“Run Your Buns Off” 5K Run/Walk

When: Saturday July 8, 2017, 8:00 am (Rain or Shine)
(Registration opens @7:00 am and closes at 7:45 am)

Where: Prairie Bridges Park, Ackley, Iowa
(North of Hwy 57: Turn north at Kum & Go, ¼ mile north on County road S56. Parking at Landis Cooperative)

Cost: \$15.00 Pre-registration (by June 23) (Includes T-shirt & refreshments)
\$20.00 Late registration/Day of Race (T-shirt not guaranteed)

Checks Payable To:

Cougar Mat Club
% Dawn Meinders-AGWSR
138 Franklin St
Ackley, Iowa 50601

Questions: Dawn Meinders
krautdaysfunrun@gmail.com
641-373-2703 (after 4:00)

Awards: Age groups
> Under 13 > 30-39
> 14-19 > 40-49
> 20-29 > 50 & up

Medals awarded to top 3 runners in each age/sex bracket.
Scheel's gift certificate and plaque to top overall male/female.

This race is one in the Miles of Smiles Race Series.
Support from <http://www.fitnesssports.com/races.html>

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Name _____ **E-Mail** _____

Address _____

City _____ **State** _____ **Zip** _____ **Phone** _____

T-shirt size: (circle one) Youth-Med Youth-L AS AM AL AXL AXXL

Runner _____ **Walker** _____ **Age as of July 8, 2017** _____ **Gender M** _____ **F** _____

Check if you are a Miles of Smiles Participant _____

Waiver: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the City of Ackley or any sponsor or contributor to this event and their representatives, successors, and assigns for any and all claims of liability of any kind arising out of my participation in this event. I agree to abide by any decision of the race official relative to my ability to safely complete this run. I assume all risks associated with running/walking in this event, including but not limited to falls, contact with other participants, the effects of the weather, traffic, and the conditions of the road, all such risks being known and appreciated by me. Further, I hereby grant full permissions to any and all of the aforementioned parties to use my name, likeness and voice, as well as any photographs, videotapes, motion pictures, recordings, or any other record of this event in which I may appear for any legitimate purpose.

Date: _____

Signature: _____

Signature of parent if under 18

Where You Have the Right to B - FIT

FitnessSports
www. .com

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515/277-4785, Fax 515/277-3854 or 800/529-7684