

## FSI Presents: Big Woods Run

<b>Name:</b>	Big Woods Run
<b>Location:</b>	St. John's Church, 19086 Jacobs Avenue, Nerstrand, MN
<b>Distance:</b>	1/2 Marathon, 10K, 5K, 1K kids run
<b>Date:</b>	October 17, 2009
<b>Start Time:</b>	9:00 am for all events except 10:30 am for the kids run
<b>Entry Fee:</b>	1/2 M - \$26 by 8/12, \$30 between 8/13-10/13, \$35 on race day: 10K + 5K - \$22 by 8/12, \$25 between 8/13-10/13, \$30 on race day: 1K - \$11 by 10/13, \$13 race day
<b>Description:</b>	1/2 Marathon, 10K, 5K, and 1K kids run through the beautiful fall colors of Big Woods State Park.

### Registration:

<b>Name:</b>	
<b>Distance:</b>	1/2 Marathon, 10K, 5K, 1K kids run (please circle all that apply)
<b>Address:</b>	
<b>City:</b>	
<b>State:</b>	
<b>Zip:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Age:</b>	
<b>Sex:</b>	M   F (please circle one)
<b>Birthdate:</b>	

Waiver: I understand that participating in this event is potentially hazardous, and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident, which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road. I further understand that the race promoters and St. John's United Church of Christ in particular shall not be held responsible for any stolen articles or any damage that may occur to my parked vehicle or the parked vehicles of others used to transport me to the event. I, for myself and my heirs and executors, hereby waive, release and forever discharge the event organizers, sponsors, promoters, representatives, successors and assigns, and all other persons associated with the event, for all my liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event. St. John's reserves the right to accept or refuse all registrations.

<b>Signature:</b>	<b>Date:</b>
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Please send this form with payment to: Final Stretch, Inc. P.O. Box 121, Nerstrand, MN. 55053