

**2nd Annual
Kenny Ault All-American Alumni Run**
Proceeds go to the Ken Ault Track & CC Scholarship Fund
5K Run/Walk

DATE: July 6th, 2019

RACE START: 7:00 am at the MGHS ALUMNI PARK

ENTRY FEE: \$25.00 REGISTRATION BY JUNE 14, 2019 TO ENSURE SHIRT SIZE AND AVAILABILITY
\$30.00 RACE DAY-Register at Alumni Park beginning at 6:00 am.

AWARDS: Top three Individual Male and Female Trophies

AGE DIVISIONS:

14-under _____; 15-19 _____; 20-24 _____; 25-29 _____; 30-34 _____; 35-39 _____; 40-44 _____; 45-49 _____; 50-54 _____;
55-59 _____; 60-64 _____; 65-69 _____; 70-74 _____; 75 and over _____

(PLEASE PRINT NEATLY)

NAME: _____ AGE: _____ BIRTHDATE: _____ GENDER: M F

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL: _____ AMOUNT ENCLOSED: \$ _____

T-SHIRT SIZE (PLEASE CIRCLE)

CHILD YOUTH SIZES: M L XL

ADULT SIZES: S M L XL

Make checks to: Ken Ault Track & CC Scholarship Fund

Mail Registrations forms to: Kenny Ault All-American Alumni Run, P. O. Box 605, Mountain Grove, MO 65711

Waiver: (Participants under the age of 18 years must have a guardian signature to be accepted.)

I am aware that participating in a running/walking event is potentially hazardous. I am aware and should be properly trained and medically able to enter a running/walking event. I willingly assume the risks of running on public streets and walkways. I assume any and all other risks that are foreseen and unforeseen, including, but not limited to, the risks of falls, the effects of weather conditions of roads, and the probability of increased risk if I am inadequately trained or medically impaired. I understand that any rule interpretation is determined by the race director and that person's judgment will be final.


Knowing these and other facts, and in consideration of your accepting my entry to participate in the Kenny Ault All-American Alumni Run, I hereby, for myself, heirs, personal representative, and anyone else who may claim on my behalf, covenant not to sue, and waive and release Kenny Ault All-American Alumni Run personnel, volunteers, city employees, and staff, including their agents, or others acting on behalf of those entries from any and all claims of liability for death, personal injury and property damage of any kind, arising out of or in the course of my participation in this event. I also promise that I will not wear headphones while participating in this race. Further, I hereby grant full permission to any and all of the foregoing to use any photographs, video graphs, motion picture recordings, or any other record of this event for any purpose whatsoever.

SIGNATURE

PARENT OR GUARDIAN SIGNATURE if under 18 years

Director use for a race day

Age division for race day _____ Race day bib # _____

Find this event & registration form on Facebook  - Ken Ault Alumni Run