

PROCEEDS TO:
LUKE KAUFMAN
BENEFIT



LUKE KAUFMAN BENEFIT 5K RUN

Runners & Walkers Welcome!

SATURDAY, NOVEMBER 16, 2013

10:00 A.M.

KALIDA HIGH SCHOOL

Event Times:

9:00 a.m. Registration

10:00 a.m. 5K Begins

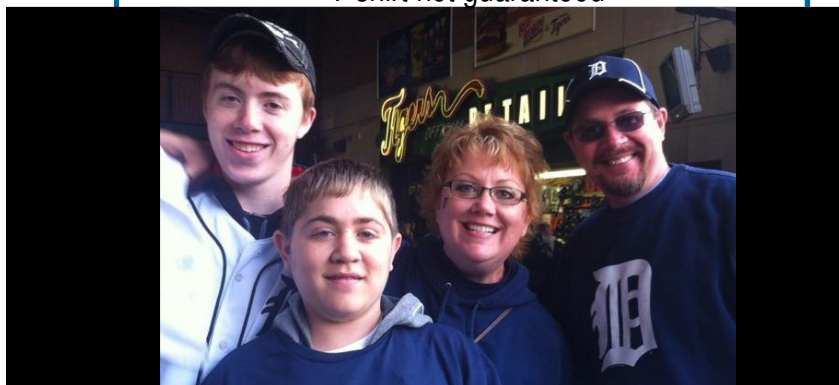
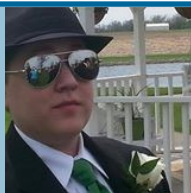
5K Fee:

\$20.00—T-shirt guaranteed if preregistered by
October 28, 2013

5K Awards:

- Awards will be given to top 3 finishers in each age division
- Race Times will be published on Luke Kaufman Benefit Facebook page after the race

\$25.00 Race Day registration
T-shirt not guaranteed



For more information, contact Jane Kaufman at 419-236-4475

Make checks payable to: The Luke Kaufman Benefit, C/O PCHD, P.O. Box 330, Ottawa, OH 45875

Name: _____ Age _____ Male _____ Female _____

Address: _____ City _____ State _____ Zip _____

Email: _____ Phone _____

Shirt Size: YM _____ YL _____ SM _____ MD _____ LG _____ XL _____ XXL _____

Waiver: I know that running a road race is potentially hazardous. I shouldn't enter and run or walk unless I am medically able and properly trained. I agree to abide by any decision of race officials relative to my ability to safely complete that run or walk. I assume all risks associated with running in this event including, but not limited to: falls, contact with others, weather effects including heat, cold and rain, traffic and the conditions of the road or terrain, all such risks being known and appreciated by me. For my safety, I understand that bicycles, skateboards, roller skates/blades, animals and radio headsets are not allowed in the race and I will abide by this guideline. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitle to act on my behalf, waive and release any sponsors and all their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. In signing this waiver, I also give permission for photos of me to be used in any media and publications.

Signature of Participant _____ Date _____

Signature of Parent/Guardian if Participant is under 18 _____ Date _____