

ONLY FOOLS RUN AT MIDNIGHT

5K RUN/WALK

SATURDAY - SUNDAY

April 7 - April 8, 2018

ON THE STREETS & TRAILS OF

MINOCQUA, WI



At Lakeland Union High School
Doors open at 7:00 pm Saturday

Brought to you by the Minocqua Area Chamber of Commerce to benefit local non-profit organizations.

The entry fee is \$25 for those who pre-register and \$35 for day-of registration. **FAMILY RATE!** Family Rate includes registration for 2 adults and up to 3 children under 18. Pre-registration cost is \$65 and day-of-event is \$75

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ Phone: _____

Email: _____

Age on Race Day: _____ Race: 5K run/walk

Performance Long-sleeve T-shirt Size: S M L XL XXL Gender M F

Where did you hear about this event? _____

I verify that I am physically fit to participate in this run/walk. I hereby release all groups and volunteers involved with the 5K run/walk from any, and all, rights or claims for damages, illness or injuries suffered by me by participating in the run/walk. I also grant permission for the use of my name, photographs and video of my participating in the run/walk.

Signature: _____ Date: _____

All participants under the age of 18 must have a parent or guardian sign.

Make checks payable to **MACC**. Mail your check with this form to
MACC, PO Box 1006, Minocqua, WI 54548.

FOR CHAMBER USE ONLY: Date received / /2018 Check# Amount\$

ONLY FOOLS RUN AT MIDNIGHT

5K RUN/WALK

SATURDAY - SUNDAY

April 7 - April 8, 2018

ON THE STREETS & TRAILS OF

MINOCQUA, WI



At Lakeland Union High School
Doors open at 7:00 pm Saturday

Brought to you by the Minocqua Area Chamber of Commerce to benefit local non-profit organizations.

The entry fee is \$25 for those who pre-register and \$35 for day-of registration. **FAMILY RATE!** Family Rate includes registration for 2 adults and up to 3 children under 18. Pre-registration cost is \$65 and day-of-event is \$75

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ Phone: _____

Email: _____

Age on Race Day: _____ Race: 5K run/walk

Performance Long-sleeve T-shirt Size: S M L XL XXL Gender M F

Where did you hear about this event? _____

I verify that I am physically fit to participate in this run/walk. I hereby release all groups and volunteers involved with the 5K run/walk from any, and all, rights or claims for damages, illness or injuries suffered by me by participating in the run/walk. I also grant permission for the use of my name, photographs and video of my participating in the run/walk.

Signature: _____ Date: _____

All participants under the age of 18 must have a parent or guardian sign.

Make checks payable to **MACC**. Mail your check with this form to
MACC, PO Box 1006, Minocqua, WI 54548.

FOR CHAMBER USE ONLY: Date received / /2018 Check# Amount\$