SATURDAY, SEPTEMBER 29TH

CLAY CENTER, KS

Registration Deadline – September 7th

The course is GPS measured. Both the 10K and 2 Mile race will begin and end in front of the main stage downtown. The course includes five mile markers and two water stops. Awards will be given to the first three male and female finishers overall and to the first three male and female finishers in each age division. Dry-Fit T-Shirts are included with the entry fee for participants *who submit by the deadline*. For your own safety, **NO HEADPHONES** will be allowed. No Refunds.

CHECK IN: **6:45 AM**

START TIME: **7:30 AM**

AGE DIVISIONS: **10K/2 Mile** 14 & Under; 15-19; 20-25; 26-30; 31-40; 41-50; 51-60; 61-69; and 70 & over

COURSE CLOSES: **9:30 AM**

ENTRY DEADLINE: **SEPTEMBER 7, 2018 {To be guaranteed a T-Shirt}**

- - - - - - ✂ - - - - - - - ✂ - - - - - - - ✂ - - - - - - - ✂ - - - - - - - ✂ - - - - - - - ✂ - - - - - - - ✂ - - - - -

Cut and return bottom portion with payment before the Sept. 6th deadline to:

MARK A. CHAPMAN
PIOTIQUE 10K/2MILE RUN

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell: _____

Email

Race: ❑ 10K ❑ 2 Mile Gender: ❑ Male ❑ Female Age: _____ Date of Birth (*required) _____

T-Shirt Youth: ❑ 10-12 ❑ 14-16

Adult: ❑ Small ❑ Medium ❑ Large ❑ XL ❑ XXL ❑ XXXL

Entry Fee	$20.00	$ _____
Late Fee	$5.00	$ _____
+ $1 per Extra Size		$ _____
❑ Cash ❑ Check		# _____
	Total	$ _____

Make Check payable and mail to: Clay Center Area Chamber of Commerce, 517 Court Clay Center, KS 67432 by the Sept 7th deadline.

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, executors and administrators, waive any and all rights and claims for damages I may have against sponsors, coordinating groups, and any individuals associated with the event, their representatives, successors and assigns for any and all injuries suffered by me in connection with said event. Also, none of the above are responsible for the loss of personal items nor any other form of aggravation in connection with said event. I have been warned I must be in good health to participate in this event. In filling out this form, I acknowledge that I am an amateur in such events. I also give my permission for the free use of my name and picture in any broadcast, telecast or print media account of this event.

❑ In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions.

Signature: _____ **~ ~ ~ ~ ~ NO REFUNDS ~ ~ ~ ~ ~**

Printed Name: _____

Parent Signature: _____ Date _____

Signature of parent/guardian if under 18 years of age

Email: claycenterchamber@gmail.com OR Call: (785) 632-5674