

# 30th Annual Elkhart County 4-H Fair

## PARADE 5000 ROAD RUN

SUNDAY, JULY 25, 2010

- ENTRY:** \$16.00 –Pre- Registration. Field limited to first 300 entries. Entry deadline July 24, 2010.  
RACE DAY ENTRY -\$20.00
- AWARDS:** Shirts to all entrants. Awards to top finishers in each age division.  
Male to 12, 13-18, 19-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60+  
Female to 12, 13-18, 19-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50+
- COURSE:** The 5K race will be run along the Elkhart County 4-H Fair Parade route lined with thousands of spectators. Flat and fast. Plan on spending your post-race time at the Elkhart County 4-H Fair. FREE admission to all on race day.
- CHECK –IN:** Starts at 11:30 a.m. and ENDS PROMPTLY AT 12:30 SHARP.  
Check-in packets must be obtained between these times. Check-in is at the Elkhart County 4-H Fairgrounds, ½ mile east of Goshen High School at the Dog Club Building Area. Runners will be bused to the starting line. Race starts at Rogers Park at 1:20 p.m.
- PROCEEDS:** Elkhart County Youth 4-H Clubs.

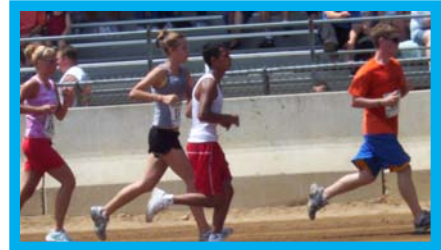
### ENTRY FORM

T-Shirt Size (Men's Sizes): \$16 or (\$20 day of race) (payable to PARADE 5000)

\_\_\_ SMALL  
\_\_\_ MEDIUM  
\_\_\_ LARGE  
\_\_\_ XL

**MUST ACCOMPANY ENTRY.**

**MAIL OR BRING TO:**  
Elkhart County 4-H Fair Office  
17746 CR 34  
Goshen, IN 46528  
(574) 533-3247



### PLEASE PRINT

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### All Contestants Must Sign Waiver

#### WAIVER (MUST BE SIGNED)

*In consideration of the foregoing, I for myself, my heirs, executors and administrators waive and release any and all rights and any of the sponsors or organizations of this event for any and all claims of damages, demands, actions whatsoever which may arise as a result of my participation in this event. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and my physical condition has been verified by a licensed medical doctor. Further, I grant full permission to any and all of the foregoing to use my likeness for any purpose whatsoever.*

Signature \_\_\_\_\_ Date \_\_\_\_\_