



Race Fees

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|--------------------|--------------------|------|--|
| Early Bird | March 1 - April 30 | \$25 | |
| Regular Rate | May 1 - June 9 | \$30 | |
| Day of Race | June 10 | \$35 | |
| Dash for the STARS | | \$10 | Available to age 8 or under, or a STARS member; Includes a tech shirt and race medal |

Registration Form

Sign up before April 30 to guarantee your requested shirt size.
 This applies to both the 5K race and the Dash for the STARS.
 After April 30, shirt availability and sizes will be on a first-come, first-served basis.

- I am registering for:
- Run for the STARS 5K
 - Run for the STARS 5K - Wheelchair Division
 - Dash for the STARS

First Name _____ MI _____ Last Name _____

Gender: Male Female

Age on Day of Race _____ Birth date MM - DD - YYYY
 (used for CARA age groupings)

Email Address (Only used for email confirmation) _____

Day Phone _____ Evening Phone _____

Emergency Contact Name _____ Emergency Contact Phone # _____

Street Address _____ Apt _____

City _____ State _____ Zip _____

Shirt Size - Check One - (Note: Tech shirts are synthetic polyester material and do not shrink.)

- Youth:** Small Medium
- Adult:** X-Small Small Medium Large X-Large XX-Large

Waiver and Release

I understand that running and/or walking a road race is a potentially hazardous activity. I should not enter and run or walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the course. I assume all risks associated with running and walking in this event, including, but not limited to: falls, contact with other participants, the effects of the weather, including heat and/or humidity, traffic and conditions of the road. All such risks being known and appreciated by me, having read this waiver and knowing these facts and in consideration of this entry I hereby for myself, heirs, executors and administrators waive any and all claims I may have for damages against the Run for the STARS 5k, College Church in Wheaton, Jim Brimm & Associates, and all sponsors, volunteers, individuals associated with the event, their representative and successors, and assigns for any and all injuries suffered by me in connection with this event, including pre and post race activities. I hereby grant permission to use my name and photographs, videotapes, motion pictures, recording or any other record of my participation in this event for any purpose. Sorry, no refunds.

Participant's Printed Name _____

Signature (Parent or Guardian if under 18 years of age) _____

Today's Date _____

Please make checks payable to Run for the STARS

Return this form and enclose payments to: **Run For The STARS, 332 E. Seminary Ave, Wheaton, IL 60187**