



Inaugural Marcy Weber 5k Run and Walk

Kid-K will take place on the MHS track at approximately 10 a.m. (while times and winners are calculated)

Saturday, May 10, 2014 • Murphysboro High School Track
Registration 8:00 a.m. • Race 9:00 a.m.

Please join with us, at Immanuel Lutheran School (ILS), in honoring Marcy Weber—a woman who has touched the lives of many in the Murphysboro community during the last 50 years. As a teacher at MHS, an interim administrator at ILS, and a volunteer in many venues she has “made a difference.” Now it’s time to show our gratitude and give back! The proceeds from the *Walk By Faith* will fund the **Marcy Weber Scholarship** at Immanuel Lutheran School.

RACE FEE

- \$15 for 5K Run or Walk
- \$10 for Kid-K

Registration deadline: April 21, 2014
Any registration forms received after April 21 are not guaranteed to receive a race day t-shirt. A limited number of t-shirts will be available for those registering the day of the race.

Awards to top overall male and female finishers and top two finishers in the Run and the Walk in each age division, male and female: 19 and under, 20-29, 30-39, 40-49, 50-59, 60 & over.

For additional information, call 618-684-3012 or email us at ilsmurphysboro@gmail.com

Please send check made payable to Immanuel Lutheran School and completed registration form to:

Veronica Manwaring
c/o Immanuel Lutheran School
1915 Pine Street
Murphysboro, IL 62966

Full Name _____ Male Female

Age on Day of Race _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Activity 5K Run 5K Walk Kid-K

Shirt Size Youth S(6-8) M(10-12) L(14-16)
Adult S M L XL 2XL

EVENT DISCLAIMER: Please review the following waiver and disclaimer. By adding your signature, you accept this waiver and disclaimer. Waiver and Release: By participating in this Event, I do so at my own risk. I assume all risk of injury, illness, damage or loss to me or my property that might result, including without limitation, any loss or theft of personal property. I consent to medical treatment in the event of injury, accident and/or illness during the Event. I agree on behalf of myself (and my personal representatives, heirs, executors, administrators, agents and assigns) to release and discharge the organizers of this event, its principals, its officers & directors, its employees, all sponsors and their representatives and employees from any and all claims or causes of action (known or unknown) arising out of their negligence. I acknowledge that I have carefully read this "Waiver and Release" and fully understand that it is a release of liability. By my signature below, I am waiving any right that I may have to bring legal action to assert a claim against any and all Event sponsors for their negligence. I hereby grant full permission to any and all of the foregoing to use my name and likeness in any broadcast, telecast, video or print media reporting or advertising of the Event without compensation.

I AGREE _____

SIGNATURE REQUIRED OR PARENT'S SIGNATURE, IF CHILD IS UNDER 18