

BOOK IT FOR BOOKS 5K



Saturday September 14th, 2013, 10 am
Bradley University



Registration/Fees: Proceeds benefit **District 150, Peoria Public Schools**. The race is **\$15** if you register before September 14th and \$20 on race day.

Register or pick up forms at Bradley University (Markin Recreation Center Office) or Running Central. Send your application and check form payable to "Bradley Running Braves," 1501 W. Bradley Ave. Peoria, IL 61625.

Online registration is available via <https://runsignup.com/Race/IL/Peoria/BookItForBooks>

Participant packet can be picked up at Running Central on Friday, September 13, 4450 N. Prospect Rd. Peoria Heights, IL 61616, or at Markin Recreation Center at Bradley University on race day, from 8:30-9:30 am.

Race day registration is from 8:30-9:30 am on at Bradley University's Markin Recreation Center. Race begins promptly at 10 am.

REGISTRATION FORM:

Name: _____

Age: _____ **Gender:** M or F

Address: _____

City: _____ **State:** _____ **Zip:** _____

E-mail: _____

Phone #: _____

Are you a ____: (Please check one)

___ BU Student ___ BU Employee ___ District 150 ___ Other

T-Shirt Size: ___ S ___ M ___ L ___ XL

Emergency Contact: Name: _____ Phone #: _____

WAIVER: In consideration of you accepting this entry, I, the participant, intending to be legally bound and hereby waive or release any and all right and claims for damages or injuries that I may have against the Event Director, RunSignUp.com, and all of their agents assisting with the event, sponsors and their representatives and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed Medical Doctor. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above waiver.

_____ (Sign and date)



For more information:

E-mail BradleyRunningClub@gmail.com or
Call Vince Tagare at (847)-313-5570