

2019 Speedy Spoofhound Registration



RUN/WALK DATE:
Saturday, April 27th

8:00 a.m. Kid's Fun Run
(Pk-8th grade students)
8:30 a.m. 5k begins

Location:
Eugene Field Elementary School

More Info:
www.efes.maryville.k12.mo.us
or e-mail questions to
Jeter@maryviller2.com

REGISTRATION

Early Registration cutoff is Friday, April 12th.
All participants registered by April 12th are guaranteed to receive a race t-shirt in their selected size on race day.

Awards given for top three male and female participants!

All proceeds go toward improving student health and wellness.

Course details: open course (no street closings); this is a family event, so we encourage walkers, strollers, etc.; no electronics/headphones on the course; full rules are listed on our website.

Please note that this event will not be officially (or chip) timed. Any participant who wishes to monitor their running time should bring their own timing device.

Speedy Spoofhound Registration - **ONE PARTICIPANT PER REGISTRATION
Please complete attached form and mail to Eugene Field with payment.

Name: _____ Work for Maryville R-II? _____ If so, which building _____

Event Entering (Circle One) Kids Fun Run 5K Kids Fun Run / 5K Combo

Address: _____ E-mail: _____

Phone #: _____ Emergency Contact: _____ Phone #: _____

Age: _____ Gender: M F Shirt Size (Circle One) YS YM YL YXL S M L XL XXL

ENTRY FEES Cash or check (payable to Eugene Field):
Maryville R-II Staff _____ 5K (\$10)

Postmarked Before 04/12 _____ 5K (\$20) _____ Kids Fun Run (\$10) _____ Bundle (\$25)

Postmarked After 04/12 OR
Race Day _____ 5K (\$25) _____ Kids Fun Run (\$15) _____ Bundle (\$30)

Disclosure: All participants must sign before the event.

As a participant in the program, I recognize and acknowledge there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damage or loss, which I may sustain as result of participating in the program. I do hereby release and discharge the Maryville R-II School District and its officers, agents, servants, and employees from any and all claims from injuries; including death, damage or loss that I may have or which may occur to me on account of my participation in the program.

Participant: _____

Parent/Guardian: _____ Date: _____