



Saturday, June 3rd 2017

Registration Form – All Races

Mail-In Registrations must be postmarked by May 26, 2017. Please print clearly. Duplicates are acceptable. Mail completed form(s) & fee to: Lake Region Run, 619 Cascade St. S, Fergus Falls, MN 56537

½ Marathon
 ½ Marathon Relay (both runners must complete a form) Team Name: _____
 5K
 1 Mile Run/Walk
 Combo Race (5K and 1 mile)

Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____ Phone _____

Birth Date ____/____/____ (MM/DD/YY)
 M
 F
 Age on Race Day: _____

Shirt Size:**

Youth	Men's	Women's
S M L	S M L XL XXL	S M L XL XXL

**PLEASE NOTE: any registrations for age 13+ AFTER May, 15th will NOT RECEIVE a t-shirt but will get a pair of FitSok socks. All registrants 12 & under will receive a t-shirt but some will need to be shipped out.*

Registration Fees & Cut-Off Dates	<u>Until:</u>	<u>April 30</u>	<u>June 1</u>	<u>Race Day</u>
Half		\$35	\$45	\$55
½ Marathon Relay		\$60	\$70	\$80
5K		\$20	\$30	\$35
1-Mile		\$10	\$15	\$20
Combo (1 Mile & 5K)		\$25	\$35	\$40

All proceeds benefit the Lake Region Healthcare Cancer Care & Research Center.

***You must be registered by May 15th to be guaranteed a race t-shirt. Anyone who registers after May 15th will receive a pair of Performance Fitsok Running Socks instead of a t-shirt. All youth 12 and under are guaranteed a t-shirt, however their t-shirt is not guaranteed to be available for pickup at the race if they register after May 15th (in this case it will be mailed to you instead). Online registration is available at www.lakeregionrun.com. All fees are non-refundable and non-transferrable. Refunds, name transfers or deferments are not permitted. All registered participants will receive updates by e-mail leading up to the event so it is very important to give an accurate e-mail address and to check it regularly. All registered participants are encouraged to pick up their race packet the night before the event at the Fergus Falls Community Area at 340 Friberg Ave. in Fergus Falls between 5-8pm.*

Signature: _____ Date: _____

Waiver: In consideration of the acceptance of this entry, I hereby for myself and my heirs, executors and administrators, waive any and all rights, claims, and damaged I may have against the Lake Region Run, Lake Region Healthcare, the sponsors, coordination groups, City of Fergus Falls, all county and state governments and any individuals associated with said event. Also, none of the above is responsible for neither the loss of personal item nor any aggravation in connection with said event. I also give permission for the free use of my name and picture in any broadcast, telecast, print or online media accounts of the event for legitimate purposes. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions. I also understand that all race fees are non-refundable, bib numbers are non-transferable and the changing of races is prohibited. The official race director reserves the right to cancel the race or change the day/time to a later day and in such event of cancellation or change, there are no refunds of entry fees. If you are 18 or under, you must have the signature of your legal guardian to participate in this event.