



15th Annual City of O'Fallon FALL 5K & 10K RUN

Hosted by the City of O'Fallon
Digital Timing by Fleet Feet Sports
Online Registration Powered By RacesOnline.com



Date/Time: **SATURDAY, OCTOBER 14, 2017 RACE STARTS 7:00 A.M.**

Location: O'Fallon Municipal Centre
100 North Main Street
O'Fallon, MO 63366

Packet pick up: Wed - Fri Oct. 11 - 13
8:30 a.m.— 4:30 p.m.
Parks and Recreation
Administrative Offices
400 Civic Park Drive
O'Fallon, MO 63366

Race Day, Sat Oct 14
6:00 a.m.—6:45 a.m.
Municipal Centre East Lobby
100 N. Main
O'Fallon, MO 63366

The 5K run (3.1 miles) and 10k run (6.2 miles) start in the parking lot of O'Fallon Municipal Centre. The race courses are clearly marked and have some hills. (See maps on pages 2 & 3.)

Registration: **Early registration fee:** 5k- \$15 and 10k- \$20 through September 11.
Late registration fee: 5k- \$18 and 10k- \$23 through October 13.
Race day registration fee: 5k-\$20 and 10k- \$25 from 6:00 a.m- 6:45 a.m.
Digital timing, race numbers, and t-shirts are guaranteed to the first 300 entrants.
Shirt sizes are not guaranteed.

Awards: Top 3 overall Male and Female finishers for both 5k and 10k races. Male and Female Age Division Awards for top 3 finishers from each race in 14 & under, 15-29, 30-39, 40-49, 50-59, 60 & over,

Post Race: At the conclusion of the event, complimentary snacks and beverages will be served to participants. The awards ceremony will be held at the Municipal Centre East Entrance at 8:00 a.m for the 5k, and 8:30 am for the 10k .
For more information call (636) 379-5605 or e-mail jhoisington@ofallon.mo.us.
Online registration available through October 8, 2017 at www.fleetfeetstlouis.com

Pirate Costume Contest

Prizes will be awarded for 1st, 2nd and 3rd place for best overall costumes.
Costumes must be worn by a registered participant for the entire race to be considered for a prize. Please dress appropriately for this family friendly event.

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Make check or money order payable to: City of O'Fallon
Mail completed registration form and registration fee to:
City of O'Fallon Attn: Fall Run 100 N. Main St. O'Fallon, MO 63366; phone (636) 379-5605

Name _____ Phone _____
Address _____ City _____ State _____ Zip _____
E-mail _____ Emergency Contact Phone _____
Age on race day _____ Birth Date (mm/dd/yy) _____ Weight _____ Gender Male Female
Which Race would you like to participate in? (CIRCLE ONE) 5k 10k
Circle Shirt Size Youth Large S M L XL 2X (Shirt sizes are not guaranteed)

IMPORTANT INFORMATION

The City of O'Fallon Parks and Recreation Department is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The City of O'Fallon tries to reduce risks and desires that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registered for the above listed programs must recognize that there is a risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the programs or activities of the City of O'Fallon. It is always advisable, especially if the participant is pregnant, disabled in any way, or has recently suffered illness, injury or impairment, to consult a physician before undertaking any activity.

WARNING OF RISK

Recreational activities/programs are intended to challenge and engage the physical, mental and emotional resources of each participant. Even with careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury and/or death when participating in any recreational activity/program. Not all hazards and dangers can be foreseen. Please understand that certain risks, dangers and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities/programs exist. It is impossible for the City of O'Fallon Parks Department and Fleet Feet Sports to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the City of O'Fallon programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims, damages or losses which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participate in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or losses, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) against the City of O'Fallon, including its agents (in this particular instance, Fleet Feet Sports), elected officials, employees, and volunteers (hereinafter collectively referred to as City of O'Fallon), including claims of negligence.

I do hereby fully release and forever discharge the City of O'Fallon from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward arising out of, connected with, or in any way associated with City of O'Fallon programs/activities, including claims of negligence.

I also agree to grant full permission to the City of O'Fallon to use my name, photo, video or recording for publicity or promotional purposes without obligation or liability to me or my family.

I have read and understand the above Important Information, including Warning of Risk, Waiver and Release of All Claims and Assumption of Risk.

Signature _____ Date _____

If Under 18, Parent or Guardian _____

Payment Type
Cash: _____
Check: _____
Card: _____

Sorry! NO REFUNDS!