



HELP HONOR OUR VETERANS
Saturday, November 2nd, 2019
At 10:00 A.M.

Race Info: Events include Kids Fun Run (Sponsored by Webb Orthodontic), 5K Walk/Run, and 10K Run

Where: Legacy of the Plains Museum, 2930 M St, Gering, NE

Times: 10K runners will start at 10:00 a.m. 5K runner/walkers will start approximately 10 minutes later. Kids Fun Run will start around 11:00 (after the 5K/10K race is over)

Registration: All racers will be required to check in at the registration booth on race day from **9:00 a.m. – 9:45 a.m.** Deadline for early registration is on or before **Oct 25, 2019**. There will be a \$10.00 fee, adults only, for late registrations. Early registrations are guaranteed shirts, and extras will be available for sale. Both the entry fee and a signed entry form are needed to enter the race. Please have your entry form and fee sent to **Warrior Run, P.O. Box, 461, Scottsbluff, NE 69363**. Make all checks payable to the **Warrior Run**.

Fee: **Before or on Oct. 25, 2019 \$30.00 Adults (16 & up), \$15.00 Children (9-15), Children participating in the Fun Run (8 and under) are free.**

Family Rate: 2 Adults for \$50 and each child (above the age of 8) is an additional \$10.00.

After Oct. 25, 2019, the fee for Adults will be \$40.00, Family Rate will be \$70.00 for 2 adults, but there is not late fee for children

NOVEMBER 2, 2019 WARRIOR RUN REGISTRATION FORM

Name: _____ Telephone: _____

E-Mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthday: _____

(CHECK ONE)

Event	Sex:	T-shirt Size (Circle One):				
___ 5K Walk	___ Male	Type: Short Sleeved	Long Sleeved			
___ 5K Run	___ Female	Youth: Small	Medium	Large		
___ 10K Run		Adult: Small	Medium	Large	X-Large XXL 3XL	

Waiver: I am entering this event at my own risk and assume any and all responsibility for injuries I may incur as a direct or indirect result of participating in this event. I hereby release and hold harmless Veterans & Military Families Emergency Relief Organization and any and all sponsors of this event, their volunteers, employees and affiliates from all liabilities, claims and expenses related to my participation in this event. I also understand and agree that the Warrior Run, Veterans & Military Families Emergency Relief Organization and any sponsors may subsequently use, for publicity or promotional purposes, my name or picture of me participating in this event without liability or obligation due me.

Signature of participant: _____

Signature of Parent/Guardian if Participant is under age of 18 _____