



HELP HONOR OUR VETERANS 2026 Warrior Run Virtual Race October 17 through Nov 14.

Race Info: Events include Virtual 5K Walk/Run and 10K Run

Registration: Registration starts now, and you have until Nov. 14th to post your time on the [Racerite website](#) or on our Facebook page.

Shirts orders will be taken until **October 9th** and will be available at the Legacy of the Plains Museum beginning **October 16th**. Both the entry fee and a signed entry form are needed to enter the race. You can register either through our online [registration Link](#) or mail the form and fee to **Warrior Run, P.O. Box, 461, Scottsbluff, NE 69363**. Make all checks payable to the **Warrior Run**.

Fee: \$30.00 Adults (16 & up), \$15.00 Children (9-15), Children 8 and under are free.

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

Registration will be open until Nov. 14

2026 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 _____