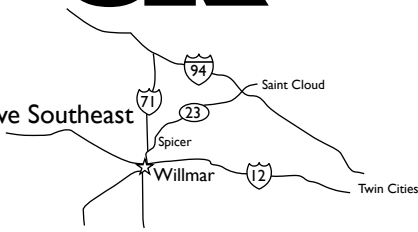


TURKEY LEG 5K RUN 2009

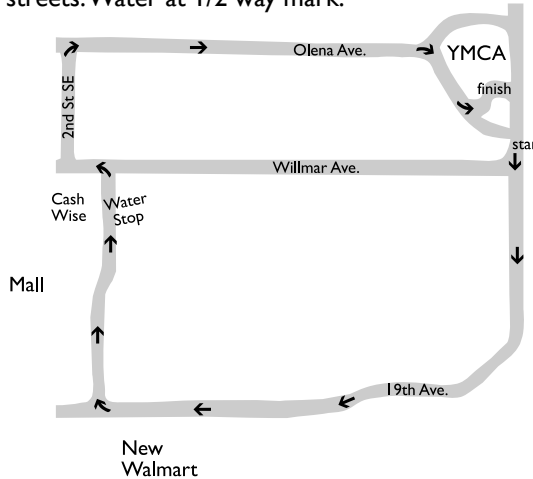
Location

YMCA
1000 Lakeland Drive Southeast
Willmar, MN



Course

3.1 miles (wheeled) on asphalt roadside around Willmar streets. Water at 1/2 way mark.



Registration

Register online at: www.tleg.zapevent.com
\$20.00 preregistration; \$25.00 day of the race
Registration begins at 7:00 a.m. day of the race
Race starts at 8:00 a.m.
Extra registration forms available at
www.pickleevents.com
You may preregister at the YMCA or online at
www.tleg.zapevent.com
Preregistration ends November 24th

Divisions

Men: 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, and 60 plus
Women: 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, and 60 plus

Awards

Trophies: Top Female and Top Male
Medals: 1-3 places in each division
Premiums: All pre-registered runners competing in the race will receive a t-shirt. Race Day T-shirts are distributed on a "first come, first served" basis on the day of the race.

Proceeds

Proceeds from this event go to the GLCRS and the YMCA.

Questions?

Contact:
Dan Hubbard, Race Director
Phone: 320-894-5882
E-mail: danh@brownandbigelow.com

Results

Visit www.pickleevents.com for race results.

NUMBER	TIME
--------	------

2009 Race Day is Nov. 26th

OFFICIAL ENTRY FORM

Name _____
Age _____ Sex: Male Female
Phone _____
Address _____
City _____
State _____ Zip _____
Email _____
Shirt Size (circle one): S M L XL XXL

In consideration of the acceptance of my entry in this event, I intend to be legally bound, hereby for myself, my heirs, executors and administrators, waive, release and discharge any and all claims for damages for death, personal injury, illness, loss of personal property or property damage including those which may be attributable to weather conditions, which I may have or which may hereafter occur to me, as a result of my participation in this event. This release is intended to discharge the Turkey Leg 5K Run, all municipalities, school districts, clubs, organizations, counties, states, sponsors, and all employees, officers and volunteers of these respective entities and any other entities associated with this event, from and against any and all liability arising out of or connected in any way with my participation in this event. I further understand that serious accidents occasionally occur during running and that participants in these events occasionally sustain mortal or serious injuries, and/or property damage or loss, as a consequence thereof. Knowing the risks, nevertheless, I hereby agree to assume those risks and release and hold harmless all of the persons or entities previously mentioned who might otherwise be liable to me (or my heirs and assigns) for any injury, death, illness or damages occurred in this event or in the travel to and from this event. I further attest that I am physically fit, have sufficiently trained for the completion of this event. I also attest I will abide by the rules and regulations of this event, all state and local municipal laws applicable. It is further understood and agreed that this waiver, release and consent is to be binding on my heirs and assigns. I recognize the hazards of this event and attest that I have adequate medical insurance coverage. I also give permission to the Turkey Leg 5K Run to use my name and any photographs, videotapes, motion pictures, recordings or any other record of my participating in this event for any publicity and/or promotional purposes with out obligation or liability to me. I hereby consent to receive any first aid medical treatment in the event of an injury, accident and/or illness during this Road Race and its related activities. I have read, understand and certify my compliance by my signature.

Date _____
(Signature of participant)
IF YOU ARE UNDER EIGHTEEN (18) YEARS OF AGE, THE FOLLOWING MUST BE COMPLETED BY YOUR PARENT OR LEGAL GUARDIAN:

_____ being the parent or legal guardian of the above entrant, who is under the age of eighteen (18) years, for good and valuable consideration, receipt of which is hereby acknowledged, I hereby consent that the above named entrant may participate in the Turkey Leg 5K Run. I hereby consent for my child to receive emergency medical treatment in the event of injury, accident, and/or illness that may occur during this event or it's related activities.

Date _____
(Signature of parent or legal guardian)

Make checks payable to: Turkey Leg 5K

Do not mail after November 14th

Mail to: Dan Hubbard
11958 21st St. NE
Spicer, MN 56288



Sponsored in part by the Glacial Lakes Championship Running Series. For more information visit www.pickleevents.com