



7<sup>th</sup> Annual

# Kinde Polka Fest Run

Saturday, September 16, 2017

EVENTS: 5K Run ☼ 5K Walk

WHEN: Saturday, September 16, 2017 at 9:00a.m. *Registration is 7:30a.m. – 8:30a.m.*

WHERE: Start and finish at North Huron Schools 21 Main St, Kinde, MI 48445 (Shower facilities available)

FEE: Pre-Register at \$20 or Post-Register at \$23 \**Pre-registration is until 8/31/16 and is appreciated to ensure enough supplies for everyone.*

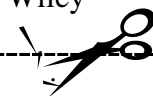
COURSE: Pavement and Gravel

AWARDS: Trophies to overall male & female winner ☼ Medals to top 3 in each age group for 5K.

AGE GROUPS: 14- under, 15-19, 20-25, 26-30, 31– 35, 36– 40, 41 – 45, 46 – 50, 51– 55, 56 – 60, 61 – 65, 66 – 70, and 71 +

FOR ADDITIONAL INFORMATION: Contact by telephoning (989)315-4172 and ask for Helen Jean Wiley

\*Bathroom and Shower Facilities available



Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Race: 5K Run ☐ 5K Walk ☐

Gender: M ☐ F ☐

Age on 8/31/17 \_\_\_\_\_

Shirt Size: Adult: S ☐ M ☐ L ☐ XL ☐ XXL(Add \$2) ☐

No T-Shirt ☐

\*Shirts are not guaranteed after August 31<sup>st</sup>, 2017



Checks payable to: FOK 5K

Total Amount Paid \$ \_\_\_\_\_

**WAIVER:** *Running a road race involves risk of serious injury. I assume all risks associated with running/walking in the Kinde Polka Fest Run. In consideration of your accepting my entry and allowing me to race, I, for myself and anyone entitled to act on my behalf or on behalf of my estate, waive and release Kinde Polka Fest, The Village of Kinde, the Township of Lincoln, the County of Huron, and all sponsors of the race, and other persons assisting with the race, the officers, Board, Board members, agents, servant, employees, and their successors and assigns of each and every of the above from all claims or liabilities of any kind arising out of my participation in the run/walk even though the liability may arise out of negligence or carelessness on the part of the persons referred to in this waiver.*



Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian (if under 18 years of age) \_\_\_\_\_ Emergency Telephone: \_\_\_\_\_

PLEASE MAIL TO: P.O. Box 256 Kinde, MI 48445

\*Proceeds go to: North Huron Track and Cross Country Program and for Scholarships for 2018 graduates

NO DOGS ALLOWED