

1st ANNUAL Brill Harvest Days 5K Walk/Run Saturday, September 9th, 2017

Presented by Grace Lutheran Church and the Brill Area Community Club

REGISTRATION at the BRILL FEED MILL: 8:00 – 8:45 AM

WE START WALKING/RUNNING AT: 9 AM

Pre-registration by August 22:

Ages 9 and Up - \$15 – and then \$20 after 8/22

Family of 4 (2 adults, 2 kids): \$40 – and \$50 after 8/22

1-Mile Kid's Race: 8 and under \$10 period (pre-registration encouraged!)

NOTE: Registration after 8/22: T-shirt not guaranteed (*Registrations are non-refundable and non-transferrable.*)

COURSE: Paved road (gravel shoulders). Race starts and finishes at the Brill Feed Mill. NO bikes or skates please. Canine friends on leash welcome!

AWARDS: First, second and third place finishers (overall) will receive a free pancake breakfast with all the fixin's!

Kid's Race Awards: Medals to top three finishers!

Please print clearly and fill out all information below.

Sign and mail this form with your check to:

Jeanette Mutchler, 2981 27-1/2 Street, Birchwood, WI 54817

Checks payable to: Jeanette Mutchler (*Proceeds to fund Grace Lutheran Church and Brill Area Community Club*)

*****Note: 1 Runner/Walker OR 1 Family Group per registration form. *****

Questions? Contact 'J' Mutchler 612-701-5715 or check us out online at: ***brillharvestdays.com***

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Individual: First Name: _____ Last Name: _____

Address: _____

Email: _____

T-Shirt: S M L XL XXL

Family Group: First Names: _____, _____,

_____, _____

Last Name: _____

Address: _____

Email: _____

T-Shirts (write in quantity of each size desired): ____S ____M ____L ____XL ____XXL

Amount enclosed: \$ _____

WAIVER: In consideration of my signing this agreement, I enter this event at my own risk and assume any risk or responsibility for injuries I may incur as a direct or indirect result of participation in this event. I also agree not to hold liable any representatives or employees of the Brill Harvest Days Planning Committee, Brill Area Community Club, Grace Lutheran Church, Brill Feed Mill, The Village of Brill, the Town of Oak Grove or the County of Barron for said injuries.

Signature: _____ Date: _____

(*Parent or guardian if under 18 required.*)