



HALLOWEEN THEME RACE!
Raffle Tickets 6 for \$5. or \$1 each for a chance
to win AWESOME RAFFLE ITEMS!

9TH ANNUAL
RUN FOR YOUR LIFE
5K RUN/WALK ♥ SATURDAY, OCTOBER 29, 2016

D118 PTO MATTHEWS MIDDLE SCHOOL
WAUCONDA MIDDLE SCHOOL

Sponsored by Matthews and Wauconda Middle Schools PTO. All fees support PTO sponsored activities, classroom equipment and field trip transportation. Encouraging a healthy lifestyle!

LOCATION:

Matthews Middle School
 3500 Darrell Road, Island Lake, IL 60042
 847.526.6210

RACE DAY:

Check in between 7:15-8:15am
 Race starts sharply at 8:30am!

AFTER RACE CELEBRATION:

Stay for breakfast and awards ceremony after the race.

REGISTRATION:

	RECEIVED BY 10/19:	DAY OF RACE:
Students:	\$15	\$20
Individual:	\$25	\$30

Includes a t-shirt, goodie bag and raffle ticket for the first 200 participants.

AWARDS AND AGE GROUPS:

Trophies awarded to the top overall Male and Female and top District #118 Employee Male and Female. Engraved medals will be awarded to the top 2 place finishers in each age group: 10 & Younger; 11-12; 13-14; 15-19; 20-29; 30-39; 40-49; 50 & Over

Registration form and payment can be returned to any District #118 school or mailed to:

Matthews Middle School
 Attn: Run for Your Life
 3500 Darrell Road, Island Lake, IL 60042

QUESTIONS:

Contact Kim Miller at 847-639-8266 or mmspto2015@yahoo.com

Checks payable to: Wauconda District #118 PTO

VOLUNTEER:

Email: d118pto.R4YLvolunteer@gmail.com

Register Online at: www.signmeup.com/116245

Name: _____ Gender: M or F Age on Race Day: _____

Student at: ___ MMS ___ WMS ___ RC ___ CC ___ WGS ___ WHS ___ D118 Faculty/Teacher ___ Other

Address: _____
Street City State Zip

Phone: _____ email : _____

T-Shirt Size: Youth: L Adult: S M L XL XXL

Unisex sizing. Correct size cannot be guaranteed. Shirts limited to first 200 applicants.

LIABILITY RELEASE I, the undersigned, intending to be legally bound, and in consideration of my application for entry into the above-referenced event, hereby for myself, my heirs, executors, administrators, legal representatives, successors and assigns, assume all risks and damages against the Wauconda Community School District #118, Town of Island Lake, Town of Wauconda, Wauconda School District officers, agents and employees, and all volunteers participating in this event, and agree to hold harmless and indemnify those parties from any claims of any nature arising out of my participation in this event. I acknowledge the inherent dangers of participating in a road race and fully assume the risks associated with same. I further verify that I am physically fit for participation in this event and that I have no condition that would preclude such participation. My execution of this agreement releases the said Wauconda School District #118, Town of Island Lake, Town of Wauconda and their officers, agents and employees from liability for any act or omission, which causes injury or damage to my person or property related to their organization and operation of this event, and my participation therein. Signature on this release also authorizes photographs to be used in promotional materials.

Signature of Participant: _____ Date: _____