

Louisburg Cider Run Entry Form

Saturday, October 5, 2019



3:00 PM: Cider Fun Begins!
*Food, entertainment, vendors
and activities for the entire family!*
3:30 PM: Kid's Fun Run
4:00 PM: 10K / 5K Walk/Run

***Participants 21 and over
get a souvenir cup of
Hard Cider after
completion of their***

Check Your Event: 10K 5K Kid's Fun Run

Full Name: _____ Team Name _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Check One: Male Female Birthdate: ____/____/____

T-Shirt Size (Check One): Youth S M L

Adult S M L XL 2XL 3XL

***All participants get a shirt
Please fill out one entry form
per person.***

Entry Fees:	Kid's Fun Run:	\$15	
	5K on or before 8/1	\$30	10K on or before 8/1 \$40
	5K 8/2 to 8/31	\$35	10K 8/2 to 8/31 \$45
	5K 9/1 to 9/30	\$40	10K 9/1 to 9/30 \$50
	5K Day of Race	\$45	10K Day of Race \$55

Total Enclosed \$ _____

Waiver: As an entrant in the Louisburg Cider Run, I assume complete responsibility for injury to me or damage to property which may occur during the event or while I am on the premises of the event. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I assume all risk associated with participating in this event including, but not limited to, falls, contact with other participants, and effects of weather, traffic, and facility or road conditions. I hereby release and hold harmless the City of Louisburg, KS, the Louisburg Chamber of Commerce, KC Running Company, volunteers, sponsors and all other persons or groups associated with the event from any and all liability associated with this event or otherwise. I grant permission to the organizers and/or agents authorized by them to use any photographs, videotapes or recordings or any other record of this event for any purpose. I understand there will be no refunds if the event is canceled due to unsafe weather conditions. ***I also understand that registrations received after September 30, 2019 are not guaranteed receipt of a t-shirt on the day of the race.***

Signature: _____

(Parent's signature required if participant is a minor)

Please make checks payable, and mail completed entry form, to:

**Louisburg Chamber of Commerce
P.O. Box 245
Louisburg, KS 66053**