

# THE OFFICER SCOT FITZGERALD

## MEMORIAL 5K

JULY 29, 2017

8 P.M. @ SJFD-1810 SEQUOIA DRIVE

*All proceeds benefit the family of Officer Fitzgerald: His wife, Dani, and children Colton and Fynlee.*

### Registration:

(Due with registration form)

\$20 before July 14th

\$25 after July 14th

<http://getmeregistered.com/OfficerScotFitzgerald5k>

### Packet Pick-up:

Friday, July 28, from 7:00 a.m. to 5:00 p.m. at Village Hall, 301 Dewey Dr., South Jacksonville

### Race day registration/Package

#### Pick-up:

Begins at 6:30 p.m.

**Awards:** Custom medals to top overall male and female finishers and the first and second place finishers, male and female, in the following age categories: Under 14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, and 55-59; male 60-64, 65-69, and 70 and over; and female 60 and over.

**Prizes:** All runner are eligible for prize drawings following the race. Must be present to win.

**TO RECEIVE AN EVENT SHIRT YOU MUST BE REGISTERED BY JULY 14TH!!**



## Registration Form

Scot Fitzgerald Memorial 5K

July 29, 2017

Registration Beginning at 6:30p.m.

**Checks Payable to: Officer Scot Fitzgerald Memorial 5K**

Mail entry form to Village Hall, Attn: 5K 301 Dewey Dr., South Jacksonville, IL 62650 or drop off at Village Hall, Weekdays 8am-5:00pm.

Name: \_\_\_\_\_

Gender: M F Age on July 29, 2017: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Shirt Size: S M L XL XXL

### Due With registration form:

\$20.00 before July 14th

\$25.00 after July 14th

**Guaranteed a shirt if registered by July 14th!!**

Waiver: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, my executors, and administrators, waive and release any and all rights and claims for any damages, loss, liabilities, claims, demand, costs and expenses, which I may now or in the future have against The Village of South Jacksonville, First Christian Church, any and all sponsors, their representatives, successors, and assigns, for any and all injuries or losses suffered by me in this event, including pre - and post-race activities. I attest and verify that I am physically fit and have sufficiently trained for this event. Further, I grant permission to The Village of South Jacksonville and/or agents authorized by them to use any photographs, videotapes, motion picture, recording, or any other record of this event, whether portraying me or not, for any purpose.

\_\_\_\_\_  
Name (Parent of Guardian if under age 18) Date

cut along the dotted line

