Stewart Memorial Community Hospital
2-Mile Fun Run/Walk

Date: Saturday, June 27, 2020
Time: 8:30 a.m.

Entry fees:
• Pre-registration prior to May 31 — entry fee $10.00
• Registration from June 1 until 8:15 a.m. day of race - entry fee $15.00

Location: The west side of the Lake City Town Square will be the starting and finishing point. In the interest of safety, roller blades/roller skates will NOT be allowed in the fun run/walk.

STUFF THE TRUCK!
Proceeds from shirt sales will benefit area food pantries. Please bring canned food items day of race to help us support their efforts.

PRE REGISTERED PARTICIPANTS:
Shirts will be available for pick up the week of June 22nd at SMCH

In the event Western Days is canceled, no refund will be made. T-shirt orders will be honored and available for pickup the week of June 22nd.

Join the Fun!
for Kids 9 & Under

Kids Dash!
this FREE dash will take place at 8:15.
Sign up day of event.
T-shirt is not included.

For more information or to register call:
Casey Wetter
712-464-4182 or 712-464-5171
cwetter@stewartmemorial.org

Awards will be given to:
• Overall Male & Female Winners
• Pre-registered Youngest
• Pre-registered Oldest
• Top 2 Men and Top 2 Women in each of the following age classes:
  - wheelchair event: 10 and under; 11-14; 15-19; 20-29; 30-39; 40-49; 50-65; 66 and over

Waiver: In consideration of your acceptance of this race entry, I, for myself, my heirs, executors, administrators and assigns, forever waive, release and discharge any and all claims, demands, known and unknown that I may have against Calhoun County, City of Lake City and Stewart Memorial Community Hospital members and agents for any and all injuries in any manner arising or resulting from my participation in the race. I attest and certify that I have full knowledge of the risks involved in this race, that I freely and voluntarily assume and pay my own medical and emergency expenses in the event of an accident, illness or other incapacity, regardless of whether I have authorized such expenses, and that I am physically, if not sufficiently trained to participate in this race.

Name
Address
Phone
Email
Adult T-shirt sizes: S M L XL 2XL 3XL 4XL
Youth T-shirt sizes: S M(10-12) L(14-16)
Sex
Age on race day

Signature
Date

Signature of parent or guardian if under 18 years of age.  Date

At this time, communication is crucial. Please help us by filling out the form completely.

Detach and mail form and entry fee to:
Casey Wetter
Stewart Memorial Community Hospital
Box 114
Lake City, IA 51449
cwetter@stewartmemorial.org