

RACE AGAINST CHILD ABUSE

5K/1Mile - Run/Walk

**April Is
Child Abuse
Prevention Month**

Date: Saturday, April 12, 2008

Time: 10:00am

**Place: Wellsville City Center
30 S Center Street**

**Packet Pick-up and Registration :
8:30am to 9:30am**



Entry fees:

By April 4th

With Shirt \$15; Without Shirt \$11;

Immediate Family Rate: \$35 (plus \$4/shirt)

Between April 5 — April 12

With Shirt \$17; Without Shirt \$13;

Immediate Family Rate: \$40 (plus \$4/shirt)

How To Register:

**Register in Person or mail
form and entry fee to:**

**Child & Family Support Center
380 W 1400 N
Logan UT 84341
(435)752-8880**

Register in Person at:

**Al's Sporting Goods
1617 N Main
Logan, Utah**

**All race proceeds will
go to support the Child
and Family Support
Center and their mission
of Strengthening Families
and Protecting Children.**

Trophies
awarded
for overall
male and female
racers in
the 5K & 1 Mile Races.



Awards given for 1st—3rd
place finishers in each age
division of each race.



Child & Family Support Center

Strengthening Families and Protecting Children
380 W 1400 N • Logan, Utah 84341
435-752-8880

Gift bags provided for each
race participant.

Name _____

Circle Sex: Female or Male

Address _____

Circle Race Running: 1 Mile OR 5/K

Phone _____ Age on race day _____ E-Mail Address _____

Adult T-Shirt Sizes: XS S M L XL

I, The undersigned racer, acknowledge, agree and understand that: 1) Voluntarily and of my own free will, I elect to participate as a member of the Race Against Child Abuse indicated below 2) I understand that there are certain risks and hazards involved in participating in the Race Against Child Abuse that may result in injury or death to me or the other racers, including, but not limited to those hazards associated with weather conditions, the race course and other participants. Further, I, the undersigned racer, agree that in consideration for the right to race in the Race Against Child Abuse that I, 1) Voluntarily elect to accept and assume all risks of injury suffered by me while participating in the Race Against Child Abuse, 2) I release, discharge and agree not to sue the Child and Family Support Center of Cache County, Inc. or the City of Wellsville, or any person or entity connected with the Race Against Child Abuse for any claim, damages, costs or cause of action which I have or may have in the future as a result of injuries or damages, sustained or incurred by me from whatever cause including but not limited the negligence, breach of contract or wrongful conduct of the parties hereby released.

Signature _____ Date _____

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