

# AMA 5k Race

April 24, 2010  
 Registration at 8:30 am  
 Race Begins at 9:30 am  
 Washington Park  
 Springfield, IL



16th annual race hosted by SIU School of Medicine Students

All proceeds to benefit M.E.R.C.Y. Communities, a non-profit organization that provides homeless and low-income families with support services ([www.mercycommunities.org](http://www.mercycommunities.org))

**Register Online!**

**[www.getmeregistered.com/ama5k](http://www.getmeregistered.com/ama5k)**



- 2 loops around Washington Park totaling 5 km (3.1 mi)
- Starting line is between playground and tennis courts.
- Awards to top finishers & 5-year age groups.
- T-shirts guaranteed for all who pre-register.
- Door prizes and refreshments after race.
- Checks payable to "SIU School of Medicine"

Please mail the entry below:	\$16 if you register online AND a member of SRRC or ISMS
Office of Student Affairs	\$18 if you register online
SIU School of Medicine	\$18 if you register on race day AND a member of SRRC or ISMS
PO Box 19624	\$20 if you register on race day
Mail Code 9624	Packet pickup at Springfield Running Center
Springfield, IL 62794-9624	Friday April 23, 4-6 PM

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age (on 4/24/10): \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Sex: M / F

Shirt Size: S M L XL **ONLINE: <http://www.getmeregistered.com/ama5k>**

I know that running a road race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained and by my signature, I certify that I am medically able to perform in this event, am in good health and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including but not limited to: falls, contact with other participants, the effect of the weather, including high heat and/or humidity, traffic and conditions of the road all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates/blades, animals, and radio headsets are not allowed in the race and I will abide by these guidelines. Having read this waiver and knowing these facts and in consideration of your accepting entry, I for myself and anyone entitled to act on my behalf, waive and release the Springfield Road Runners Club, the City of Springfield, Southern Illinois School of Medicine, and all negligence of carelessness of the part of the persons named in this waiver.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (parent or guardian, if under 18 years)