STONY CREEK
2nd ANNUAL OUTRUN
PANCREATIC CANCER 5K
SUNDAY, OCTOBER 13, 2013

Funds raised will be donated to the Pancreatic Cancer Action Network

WHEN AND WHERE: Sunday, October 13, 2013 (rain or shine)

- *REGISTRATION*: begins at 8:30 a.m. at the Oakgrove A Pavilion inside Stony Creek- Metro Park
  4300 Main Park Road, Shelby Township, 48316

- *START TIME*: 1 Mile Memory walk begins at 9:00 AM (not timed)
  5K Run begins at 9:30 AM (pull-tag timed)

- *PARKING:* There is a $5 fee to enter the park. Upon entering please ask for a map and locate the Oakgrove A Pavilion. There will be signs and purple balloons to help guide you.

COST: *Please register online at* ***www.RaceRaceRace.com***

• 5K Run	$25 by 10/4	$30 thru 10/13
• 5K Memory Walk	$15 by 10/4	$20 thru 10/13

Must register by October 6th to receive a t-shirt

Donations kindly accepted through
http://www.firstgiving.com

Search "*2nd Annual Outrun Pancreatic Cancer 5K*"

If you are unable to register online please register by mail.
Complete the registration form, sign the waiver and mail with your payment!

REGISTRATION FORM

PLEASE PRINT NEATLY

Name: _____

Phone: _____

Address: _____

E-mail: _____

Age at time of race: _____ T-shirt size: _____

Must register by Oct 6th

Please circle: Male Female

5K Run:	$25 by 10/4	_____	$30 thru 10/13	_____
1 Mile Walk:	$15 by 10/4	_____	$20 thru 10/13	_____

Waiver: In consideration of my participation in this event, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, waive all rights and claims for damages I may have against Stony Creek-Metropark, Shelby Township, County of Macomb, race directors, event officials, A2 Race Management LLC, volunteers, and any suppliers, agents independent contractors, employees and any other personnel in any other way assisting or connected with this event and the sponsors of this event, their agents, representatives, land owners, successors and assignees for any and all injuries suffered by me at said event, or which may arise out of my traveling to, participating in and returning from this event. I further state that I am in a proper physical condition to compete in this event. I understand that participating in this run includes an element of risk for me and I should not participate unless the I am physically able and properly conditioned. I agree to abide by any decision of an event official relative to my ability to complete this event safely and I further agree that event officials may authorize emergency treatment for me. I also understand that vehicle traffic and spectators may be present along the course, and I assume any contact with spectators, other participants, the effects of the weather (including temperature extremes and humidity) and other surface conditions of the roads and sidewalks; all such risks being understood and appreciated by me. I agree to abide by all rules of this event. I also understand that any sponsor may subsequently use, for publicity or promotional purposes, my name or pictures of me without liability or obligation to me.

Signature:_____ Date:_____

Signature of parent or legal guardian required for participants under the age of 18.
Please no bikes, roller blades, skateboards or other hazards – thank you.

Please make checks payable to: Outrun Pancreatic Cancer 5K Fund
Send to: 12850 Daily, Sterling Heights MI 48313