



"MOONSHINE" RUN !

5K RUN/FUN WALK

Saturday October 11, 2014



Pre-registration by Sept. 27, 2014

- Entry Fees:** \$20.00– Pre-registration w/shirt (**Runners**)
 \$25.00–After pre-registration w/shirt (While supplies last)
 \$10.00–Pre-registration w/shirt (**Walkers**)
 \$15.00–After pre-registration w/shirt (While supplies last)

Registration: Mail the tear-off on this form to the address below.
 Race day registrations will be received at the start location
 from 5:30 - 6:30PM. EDT

Start Time/Location: 7:00PM. EDT, Green River Lake State Park,
 Campbellsville, KY. 42718

Proceeds: 100% to The Friends of Green River Lake, A Non-Profit organization

Runner Awards: Awards by age group, under 14, 15-19,20-24,25-29,30-34,35-39,
 40-44, 45-49, 50-54,55-59,60-64,65-69, 70+

More information: contact Shawn Canada at 270-789-3776 or by email
crazyhorsesearchery@gmail.com

ENTRY FORM

PLEASE PRINT CLEARLY

NAME: _____ PHONE _____

EMAIL ADDRESS _____

STREET _____ CITY _____

STATE _____ ZIP _____ AGE _____ GENDER: M OR F

On 10/11/14

REGISTRATION: (CHECK ONE)

RUNNERS: \$20.00 Pre-registration \$25.00 After pre-registration

WALKERS: \$10.00 Pre-registration \$15.00 After pre-registration

MAKE CHECK TO: THE FRIENDS OF GREEN RIVER LAKE

MAIL TO: The Friends of Green River Lake

Attn: Shawn Canada

2422 New Columbia Rd., Campbellsville, KY 42718

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|-------------------|
| CIRCLE SHIRT SIZE |
| SM |
| MED |
| LG |
| XL |
| XXL |

In consideration of the acceptance of my entry, I for myself and assignees do hereby release and discharge all race sponsors and those assisting with the race for all claims of damages, demands or actions arising or growing out of my participation in said athletic event. I attest I have knowledge of risks involved in said event and am sufficiently trained to perform in the event. I acknowledge all information submitted is true, participant fees are non-refundable and I grant permission to use any photographs, motion pictures, recordings or any other record of this event.

SIGNATURE: _____ DATE: _____ PARENT SIGNATURE: _____ Required if under 18