McDonough County Health Department

Grin and Bear It

Fun Run or Walk

**Saturday, September 8, 2018- Macomb, Illinois**

Spring Lake

Macomb, IL

Start Time: 8:00 a.m. (Event will be held Rain or Shine)

Race Day Registration/Packet Pick-Up: 6:45 a.m. – 7:45 a.m.

**Additional information for this event can be found on our website at www.mchdgrinandbearit.weebly.com**

**Proceeds go toward dental treatment for those in need in McDonough County.**

Advance Registration $25; Race Day $30

**\*\*Free Event T-Shirt for anyone that Pre-Registers prior to August 31, 2018!**

Shirts are not guaranteed after pre-registration date.

***Please make checks payable to McDonough County Health Department for the amount of the event and mail along with completed form to: MCHD Grin and Bear It, 505 E. Jackson St. Macomb, IL 61455***

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**Please check Shirt Size:** Complete one form per participant – Deadline is 8/31/18 to be guaranteed a shirt

Shirt Size: □ Small □ Medium □ Large □ X-Large □ XX-Large

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age:\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone # :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Amount Enclosed:\_\_\_\_\_\_\_\_\_\_

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of your acceptance of this entry, I hereby for my heirs and executors, waive and release any and all rights and claims for damage against all supporters, including McDonough County Health Department, Veteran’s Park, and the City of Macomb, as well as any other officials and organizations associated with this Race for any harm or injuries suffered by me in connection with this event, and I am physically fit and sufficiently trained to participate in this event.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Entrant under 18 must have a Parent/Guardian Signature)

Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_