

The Race

The Peoria Veterans Day 5K Run takes place at the Rio Vista Community Center in Peoria on Saturday morning, November 13, 2010. This is the 3rd running of this annual 5K running race & non-competitive family fitness walk. The race was created to promote patriotism and encourage citizens to participate in a celebration of our country's freedom by honoring all veterans, living and deceased, who have served our country.

Race-day Schedule

November 13, 2010
 6:00 AM - 7:15 AM Race-day Registration
 6:00 AM - 7:15 AM Race Check-in/Packet Pick-up
 7:30 AM Peoria Veterans Day 5K Run
 7:35 AM Noncompetitive Family Fitness Walk
 8:00 AM Pancake Breakfast
 8:30 AM Awards Ceremony*
 *Awards and Veteran's recognition ceremonies will be conducted at the conclusion of the race.

Post-race

Awards and Veteran's recognition ceremonies will be conducted at the conclusion of the race during the Pancake Breakfast.



November 13, 2010

Registration Categories

Race management is committed to providing high-quality events at a reasonable cost and pricing for the Peoria Veterans Day 5K Run includes several early-bird registration discount options. The event will take place rain or shine, with no refunds available. (We are looking at having a team category, check web site for the latest information.)

- 5K Entry
 - \$15 Military Veterans and Military Personnel
 - \$15 through 9/30/10
 - \$20 10/1/10-11/10/10
 - \$20 3 to 5 person teams through 11/10/10 (online only)
 - \$25 Race-day (\$20 for Military)
- Family Fitness Walk Entry
 - \$10 through 11/10/10
 - \$15 Race-day

Awards

All registrants will receive a t-shirt. Top Male and Female Military. Top Male and Female Overall. Top Three Finishers in each age division (13 and under, 14-19, 20-29, 30-34, 35-39, 40-44, 45-49, 50-59, 60-69, 70+). Top team in each Team Division, a medal for each team member.

Race/Bib Numbers

You will be issued a bib number with a pull tag attached to it. You must leave the tag attached until after you cross the finish line. This tag will allow you to be identified correctly in the results.

Course Information

(Course is getting updated to allow for a better start, check web site for the latest information.)
 5K: The 5K (3.1 miles) will begin and end on the pedestrian/bicycle path, near the Rio Vista Community Center. The course will be two loops of bike path which consist of slightly rolling hills.

Race Web Site

www.wingfootfinish.com

Mail Entries to (postmarked by November 3, 2010): Peoria Veterans Day Run, c/o Wingfoot Finish, 11419 E Petra Ave, Mesa AZ 85212

Make checks payable to: Wingfoot Finish

5K Run (\$20, \$25 Race-day) Family Fitness Walk (\$10, \$15 Race-day) non-competitive

 Last Name

 First Name

Gender M F

_____/_____/_____
 Birth Date (mm/dd/yyyy)

For Official Use Only	
Bib #:	_____
Paid: Cash / Check	_____
Amount:	Check: _____
\$ _____	# _____

 Address

 City

 State

 Zip

 Email

Shirt Size S M L XL

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors, and administrators waive any and all rights, claims for damages and forever discharge the City of Peoria, an Arizona municipal corporation, its elected and appointed officials, directors, officers, boards, commissions, agents, representatives, servants, and employees, and any and all other persons, firms or corporations who are or might be liable, from any and all claims of any kind or character which I/we have or may have against them due to my participation, or my child's participation, in this event. This waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of this event. In that regard, I covenant to indemnify, defend, and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorneys' fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them or any of them. I understand that medical claims are my responsibility. This waiver does not extend to any such claim or liability that is caused by the sole and exclusive intentional acts or gross negligence of the City of Peoria or its officers, employees, or agents. I have been warned I must be in good health to participate in this event. In completing this form, I acknowledge I have read and fully understand my own liability and to accept the restrictions.

 Signature (parent/gaurdian's signature required if under 18)

 Date