

SPECIAL EVENTS

5th Annual

# TURKEY TROT

2009

1 & 5 Mile  
Road Race & Walk

Awards will be giving to first and second in each age division for both male and female. This is also a family event.

Feel free to come as a family with kids, strollers, dogs, etc. and run or walk as a family before that Thanksgiving feast!

## INFORMATION

DATE NOVEMBER 26, 2009

FEES: \$25 PRIOR TO RACE  
\$30 DAY OF RACE  
\*Fee includes a long sleeve t-shirt; Those who register the day of the race may not receive their shirt on race day but will receive one.\*

DEADLINE 8:30 AM DAY OF RACE

TIME RACE BEGINS AT 9:00 AM SHARP  
\*BEGINS AT THE YMCA

AGE GROUPS & DIVISIONS (male/female)  
19 & under  
(under 18 must have parent/guardian signature)  
20-29  
30-39  
40-49  
50-59  
60 & over

Visit our website and register there!  
[www.beatriceymca.org](http://www.beatriceymca.org)



No one denied because of inability to pay. Ask about our Open Doors Program

## 2009 TURKEY TROT REGISTRATION FORM

Name \_\_\_\_\_ Email contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Gender \_\_\_\_\_ DOB \_\_\_\_\_ Age Today \_\_\_\_\_ Contact Number \_\_\_\_\_

How did you hear about YMCA Turkey Trot? [ ] Mail [ ] Website \_\_\_\_\_ [ ] Radio [ ] Newspaper  
[ ] Returning Participant [ ] Friend

Choose One: [ ] 1 mile run or walk [ ] 5 mile run Shirt Size: \_\_\_\_\_

### Waiver Must Be Read and Signed Before Running:

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release the Beatrice Family YMCA, all sponsors, their representatives and successors from all claims of liabilities of any kind, including any claims arising out of negligence of the aforementioned parties, arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recording, or any other record of this event for any legitimate purpose.

Signature \_\_\_\_\_ Signature of Parent/Guardian (if under 18) \_\_\_\_\_

For Office Use Only:  
Program Fee \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_ Payment Method: [ ] Cash [ ] CC [ ] Check \_\_\_\_\_

