

Greendale 4th of July 5k Run/Walk
July 4, 2010 at 9:00 a.m. EST
 Start and Finish at Greendale Park

In honor of Daniel Schuler, suffering from IBM form of Myositis, the Schuler family is hosting this 5k Run/Walk. The proceeds will go to research for this debilitating disease.

DIRECTIONS: From Ohio take 275 South. From Kentucky take 275 West. Take the Lawrenceburg/Greendale/Aurora exit. Proceed straight through traffic light to stop sign. Turn left onto Ridge Ave. and go approximately ¼ mile to Parkside Ave. Turn right and proceed to flashing light. Turn left onto Nowlin Ave. and park is ½ block on right.

COURSE: Very flat and fast.

5k RUN AND WALK DIVISIONS: Male and Female:
 14/under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49,
 50-54, 55-59, 60-69, 70-79, 80/over.

PRE-REGISTRATION: Mail-in entries must be postmarked by Friday, June, 25, 2010. Online registration available at www.racedmc.com

AWARDS: Awards to overall male and female and 1st, 2nd, and 3rd place in all divisions.

ENTRY FEES:

- \$5 Team pre-registration (10 or more, no t-shirt)
- \$10 Pre-registration (no shirt)
- \$18 Pre-registration (with shirt)
- \$13 Race day registration
- \$10 T-Shirt Race Day

ON LINE REGISTRATION: www.racedmc.com

RESULTS: Will be posted online at www.racedmc.com

POST RACE: Refreshments and prizes.
 (must be present to win)

RACE DAY REGISTRATION: Opens at 7:30 a.m. at the cabin behind the pool at the Greendale Park.

FURTHER INFORMATION:
 Contact Susan Kraisinger @ 812-537-5446

Greendale 4th of July 5k Walk/Run Official Entry Form (One entry form per person)

Name: _____ Team Name: _____
 (First) (Last)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ e-mail _____

Category: 5k Run 5k Walk Age: _____
 (As of 7/4/10)

_____ \$10 Pre-registration (no shirt)

Sex: Male

_____ \$18 Pre-registration (with shirt)

Female

Circle T-shirt size: YM YL S M L XL 2XL

_____ \$13 Race day registration (no shirt)

_____ \$10 Race Day Shirt only

_____ Monetary donation only Enclosed is a \$ _____ donation to The Myositis Association

Check payable to:

The Myositis Association

Mail entry to:

Greendale 4th of July
 c/o Susan Kraisinger
 204 Probasco
 Lawrenceburg, IN
 47025

WAIVER/RELEASE: In consideration of the acceptance of my entry, I hereby waive, discharge and release on behalf of myself, my heirs, executors and assigns, all claims of any nature arising from my participation in the Myositis 5k Run/Walk, and do hereby release the Myositis Association, City of Greendale, Susan Kraisinger, the family of Daniel Schuler, all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all rules for participation. I understand the risks involved in such a run/walk, and that I am physically fit and have trained adequately in preparation. I also give my permission to the Myositis Association to use any photographs, video or other recordings of me that are made during the course of this event.

Signature of Entrant _____ Date ____/____/10

Signature of Parent _____ Date ____/____/10
 (Required if participant is under age of 18)

For additional information regarding disease visit www.myositis.org
 Thank you for your participation