

**5th Annual
Blue Lake Twp Firefighters' Association
St. Patrick's Day 5k Run/Walk
Saturday, March 16th**

When: Saturday, March 16, 2013

Late Registration 8:45 – 9:45 am / **Race Starts at 10:00am**

Walkers welcome- will be timed as a runner

Where: Race starts and finishes at the Blue Lake Twp Fire Department (1491 Owasippe Rd)

Directions: Take M-120 North to Blue Lake Rd(left at Twin Lake) follow Blue Lake Rd. to Owasippe Rd turn left go approximately 1 mile to the Fire Dept.

Awards: Trophies to Overall Male & Female Winners and Male & Female Masters Winners

Medals to 1st, 2nd, & 3rd Age group winners

Age Groups – 9 and under and every 5yr age group entered

Special Division for all Firefighters (1st, 2nd, & 3rd place Medals)

KILT DIVISION (1st, 2nd, & 3rd place Medals) must wear kilt while running

Cost: \$14.00 pre-registered **without** shirt (Must be postmarked by March 8, 2013)

\$20.00 pre-registered **with short sleeve shirt** (Must be postmarked by March 8, 2013)

\$10.00 per person **Special Family Rate(NO SHIRT)** 3 or more living at same address

Must be pre-registered (Must be postmarked by March 8, 2013)

\$25.00 Late registration **with short sleeve shirt** – if available

REGISTER ONLINE AT www.goracego.com

No shirts will be mailed, no refunds

MAKE CHECKS PAYABLE TO: BLUE LAKE TWP FIREFIGHTERS ASSOC.

RUN/WALK WILL BE HELD REGARDLESS OF WEATHER

SORRY, NO DOGS OR PETS ALLOWED*STROLLERS ONLY WITH WALKERS*****

RACE PROCEEDS SUPPORT THE BLUE LAKE TWP FIREFIGHTERS

For more information call Debbie or Jim Therrian @ (231) 894-9693

Refreshments will be available to the runners/walkers after the race

CUT HERE:

Application must be post marked by March 8, 2013 for early registration

Name: _____ **E-Mail:** _____

Street Address _____ **City** _____ **Zip** _____

Age Race Day _____ **Birthdate** _____ **Phone#** _____

Circle One: MALE FEMALE

Shirt Size(circle one) no shirt S M L XL XXL(\$3 extra)

ARE YOU A CURRENT FIREFIGHTER? YES _____ NO _____

WILL YOU BE WEARING A KILT? YES _____ NO _____

I assume all risks associated with running/walking in this event including, but not limited to, falls, contact with other participants, the effects of the weather, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry I, for myself and anyone entitled to act on my behalf waive and release the Race Director, Officials and all persons and organizations officially connected with this event and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to use any photographs or any other record of this event for any legitimate purpose.

Entrant Signature _____ (read above waiver)

(Parent or Legal Guardian if under age 18)

Mail to: Debbie Therrian, 11033 Nichols Rd., Holton, MI 49425