

# WA DU SHUDA 5K / HALF MARATHON

WWW.STEPPINGFORHUNGER.COM

## SATURDAY, JULY 7TH

SILVER STAR HEALTH, 201 LEER STREET, NEW LISBON

FEATURING THE 3RD ANNUAL...

# SILVER STAR HEALTH - HEALTH FAIR

THE WA DU SHUDA 5K / HALF MARATHON IS SPONSORED BY THE NEW LISBON WRESTLING CLUB, MILL HAVEN FOODS, SILVER STAR HEALTH, AND THE FUN COMPANY.

THE WRESTLING CLUB IS VERY ACTIVE IN OUR SCHOOL DISTRICT. THEY PROVIDE UNIFORMS AND SUPPLIES FOR THE YOUTH, JR. HIGH, AND HIGH SCHOOL TEAMS. THEY ALSO AWARD STUDENT ATHLETE SCHOLARSHIPS EVERY YEAR.

INTERESTED IN A HEALTH FAIR BOOTH OR A 5K / HALF MARATHON QUESTION: RICKI@MILLHAVENFOODS.COM

### ENTRY FEES

5K PRE REGISTRATION - \$20.00

5K DAY OF - \$30.00

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HALF PRE REGISTRATION - \$30.00

HALF DAY OF - \$40.00

CANNOT GUARANTEE SHIRT  
IF REGISTRATING AFTER JUNE 30

### RACE PACKET PICKUP

FRIDAY, JULY 6

SILVER STAR HEALTH

4PM - 6PM

SATURDAY, JULY 7

5K 6AM - 7:45AM

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HALF 6AM - 6:45AM

### AWARDS

5K 1ST, 2ND, AND 3RD DIVISIONAL AWARDS

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HALF 1ST, 2ND, AND 3RD DIVISIONAL AWARDS

### RACE START TIMES

5K 8AM

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HALF 7AM

## RACE LOCAL . SUPPORT LOCAL . BE LOCAL

LIKE US ON FACEBOOK! [FACEBOOK.COM/WADUSHUDA](https://www.facebook.com/wadushuda) & [FACEBOOK.COM/SILVERSTARHEALTH](https://www.facebook.com/silverstarhealth)

### WA DU SHUDA ENTRY FORM

MAIL TO: HOLLIE SLATER PO Box 132 New Lisbon, WI 53950

CHECKS PAYABLE TO "NEW LISBON WRESTLING CLUB"

NAME: \_\_\_\_\_ RACE: 5K HALF AGE AS OF 7/7/2018: \_\_\_\_\_

GENDER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ SHIRT SIZE: YM YL S M L XL XL XXL XXXL  
CANNOT GUARANTEE SHIRT SIZE OR SHIRT IF REGISTRATING AFTER JUNE 30

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY CONTACT #: \_\_\_\_\_

### WAIVER:

I RELEASE DISCHARGE AND COVENANT NOT TO SUE THE NEW LISBON WRESTLING CLUB AND ITS OFFICERS, AND VOLUNTEERS FROM LIABILITY ARISING FROM BODILY INJURY, LOSS, OR DAMAGE OF ANY KIND WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE, IN CONNECTION WITH THE PARTICIPATION OF THE RUN. I ASSUME ALL RESPONSIBILITY FOR INJURY AND UNDERSTAND I RUN OR WALK AT MY RISK.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

IF UNDER 18 PARTICIPANT'S PARENT OR GUARDIAN MUST SIGN