

# 15th Annual City High Girls Cross Country



## ***RUN FOR RELIEF 5K***

Presented by the City High Women's 2019 Cross Country Team

About this year's beneficiary: Table to Table is a local, nonprofit organization whose mission is to “keep wholesome, edible food from going to waste by collecting it from donors and distributing to those in need through agencies that serve the hungry, homeless and at-risk populations.”

When: **Saturday, November 9th, 2019 at 10:00 am** (Registration opens at 8:00 am)

Where: **Terry Trueblood**

Course and Awards: This is a very fast, very flat PR-type course. Medals will be given to the first 2 finishers of each of the following age groups for both men and women: 12 and under, 13-18, 19-29, 30-39, 40-49, 50+. Walkers are welcome to participate.

Registration: On the morning of the race, report to the registration table to receive t-shirts and race packets. If you haven't mailed in registration material, you may register at 8 a.m. at Terry Trueblood. To be guaranteed a t-shirt, you must register before October 20th. A limited number of t-shirts will be available the day of the race.

Fee: \$21 per participant (checks payable to Run for Relief) Includes a t-shirt. **All proceeds will go to Table to Table.** To be guaranteed a t-shirt, you must register before October 20th.  
\$15 without a t-shirt.

Questions and Comments: Email Sylvia Gidal [sabgidal@gmail.com](mailto:sabgidal@gmail.com), Grace Parrott [grpar20@icstudents.org](mailto:grpar20@icstudents.org), or Mary Bounds [mabou20@icstudents.org](mailto:mabou20@icstudents.org)

## REGISTRATION FORM

NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ AGE: \_\_\_\_\_

T-SHIRT SIZE (circle one): Youth Large Small Medium Large Extra Large None

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent or Guardian Signature (if participant is under 18):

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### Waiver and Permissions

I know that running in and volunteering to work for City High Women's Cross Country Fundraising committee are potentially hazardous activities. I should not enter and run, walk, and/or volunteer 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, walk, and/or volunteer. I also agree that I may be examined and treated if necessary during the course of a race by qualified personnel in the event medical problems of any cause arise. The race officials or the qualified personnel have the right to disqualify me and remove me from the race if, in their opinion, I may be suffering from a life-threatening condition. I assume all risks associated with running in and volunteering for races including, but not limited to, falls contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic of 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 for participation in races and/or my volunteering, I, for myself, and anyone entitled to act on my behalf, waive and release the City High Women's Cross Country Fundraising committee and the City of Iowa City from all claims of liabilities of any kind arise out of negligence or carelessness on the part of the persons named in this waiver. I also approve of my, and/or dependent's picture taken before, during, or after the races for promotional use without further compensation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Signature (if participant is under 18):

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### Please mail race forms to:

Sylvia Gidal  
328 Brown Street  
Iowa City, IA  
52245

