



# 5K & 1 Mile

## November 17<sup>th</sup>, 2018

Proceeds to benefit ALD Research



**Location and Time:** Creve Coeur Park, Tremayne Shelter  
13725 Marine Ave, Maryland Heights, MO 63043  
5K Run / 1 Mile Walk: 9:00 AM

**Entry Details:** Register by November 01, 2018: - \$25  
Register after November 01, 2018: - \$35  
Register via paper form below or online at:  
<http://www.fleetfeetstlouis.com/racing/run-for-ALD>

All checks should be made payable to Knockout ALD, Inc.

**T-Shirts:** All participants receive a short sleeve tech T-shirt

**Awards:** 5K: Male and Female: 10 and Under; 11-14; 15-19; 20-29; 30-39; 40-49; 50-59; 60-69; 70+

**Packet Pick Up:** Friday November 16<sup>th</sup> from 3:30 PM to 6:30 PM Knockout ALD Office  
841 Gardenway Dr., Ballwin, MO 63011  
Race morning at Creve Coeur Park, Tremayne Shelter from 7:00 AM to 8:15 AM

**Event Contact:** For additional information, contact Julie/Dave Purschke at [RunforALD@yahoo.com](mailto:RunforALD@yahoo.com)

Checks should be made payable to Knockout ALD, Inc.

Please mail to Knockout ALD, 841 Gardenway Dr., Ballwin, MO 63011.

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Age on Race Day:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Gender:**  Male  Female **Race:**  5K Run / Walk  1 Mile Run / Walk

**Shirt Size:**  Youth S  Youth M  Youth L  Youth XL  Adult S  Adult M  Adult L  Adult XL

Waiver: In consideration of your accepting this entry, I, intending to be legally bound, hereby for myself, my heirs, my executors, and administrators, waive, and release any and all rights and claims or damages I may have against David and Julie Purschke, Knockout ALD, Inc, University of Minnesota Foundation, Fleet Feet Sports, Red Iguana Racing, and St. Louis County Parks and Recreation, their affiliates, subsidiaries, officials, representatives, employees, successors, volunteers, and assigns for any and all injuries suffered by me in these events. I attest and verify that I am physically fit and have sufficiently trained for the completion of these events. Further, I hereby grant full permission for the free use of my name and/or photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose. My submission of this form shall act as my legal signature.

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

(Parent or Guardian must sign if under 18 years old)