



# MSC Race Series



**Saturday, May 10<sup>th</sup>, 2007**

**Pike Island**

8:00 AM Registration Opens  
9:30 AM 10K & 5K Run/Walk  
10:00AM 1K Family Fun Run  
10:30 AM Awards

**Saturday, May 24<sup>th</sup>, 2007 &**

**Saturday, Sept 6<sup>th</sup>, 2007**

**Gateway Trails**

7:15 AM Registration Opens  
8:30 AM 10K & 5K Run/Walk  
Age Groups: under 20, 20-29, 30-39,  
40-49, 50-59, 60-69, Grand Master  
(70+)

For more information about the event email

[www.minneapolisclub.net](http://www.minneapolisclub.net)

*The MSC Race Series benefits the Minneapolis Ski Club. Helping youth achieve their Olympic Dreams!*

\$20 per race if pre-registered or \$25 per race on race day. All pre-registered racers will receive a free race t-shirt

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**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_ **MI** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Email** \_\_\_\_\_ @ \_\_\_\_\_

**Phone** \_\_\_\_\_

**Birth Date (MM/DD/YY)** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Age (on April 15<sup>th</sup>)** \_\_\_\_\_

Event(s) Entered (place check next to the event(s) you would like to enter. T-shirts are only guaranteed to pre-registered participants.

Entry Type/Fee	10K	1K	5K	Total:
Early Entry	[ ] \$20	[ ] \$10	[ ] \$20	\$
Late Fee*	Add \$5	Add \$5	Add \$5	\$
T-Shirt	Size: circle one S M L XL			

Donations to the *Minneapolis Ski Club* are welcome.

Total: \$ \_\_\_\_\_

Checks written to:  
Minneapolis Ski Club

\*Entry form and payment must be received by May 1<sup>st</sup> to receive early entry price.

Please send entry form and payment to:

**Minneapolis Ski Club; 1758 Lakewood Drive; Maplewood, MN 55109**

MSC Race Series Waiver: Signature required

I, \_\_\_\_\_ (athlete), understand that running/walking carries significant risk of serious injury, death, property damage. I also know that there are natural and environmental conditions and risks which independently or in combinations with my activities may cause severe or even fatal injuries to me or others. I agree that I am alone responsible for my safety while participating in the Pike Island Runderzvous and specifically acknowledge that the following persons or entities including the sponsors, the organizers, Fort Snelling State Park, are not responsible for my safety. I specifically release and discharge, in advance, those parties from any and all liability whether known or unknown, even though that liability may arise out of negligence or carelessness on the part of person or entities mentioned above. I agree to accept all responsibilities for the risks, conditions and hazards which occur whether they are known or unknown. Being fully aware of the risks, conditions and hazards of the proposed activity as a competitor and program participant, I hereby agree to waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have or which may accrue to me as a result of my participation in this training camp. I further agree to hold harmless and indemnify all person and entities identified above, and generally specifically, from any and all liability to forever hold harmless and indemnify all persons and entities identified above, generally and specifically, from any and all liability for death, personal injury or property damage resulting in any way from my participating in the Pike Island Runderzvous. I currently have valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities identified above from providing this coverage for me. This acknowledgment and assumption of risk and release shall be binding upon my heirs and assigns. I have been informed of the risks and I agree to wear appropriate protective equipment while roller skiing. I will make the decision as to what equipment is appropriate. If I do not wear appropriate equipment I assume sole responsibility of any results of my actions including sever or fatal injuries. I understand that this is my sole responsibility and release all person identified in the above waiver from any liability.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Parent or guardian's signature if under 18): \_\_\_\_\_