

Milford Special Olympics 5K Road Race and Walk

**Date: Saturday,
September, 22, 2018**

**Time: 8:00AM Registration
8:30AM Fun Run for Kids
(Awards Given Immediately
Following Race)
9:00AM Road Race and Walk**

Pre-register by: September 14,

Entry fees:

- 20.00 for pre-registered \$25.00 day of runners/walkers
- \$10.00 for Ages 10 and under who participate in the Fun Run.
 - Free for runners/walkers over 70
- T-shirts for all pre-registered walkers and runners.

**Race will begin and end at the
Milford High School in the back
parking lot by the gym entrance.**

**For More Information please contact
Jennifer Walsh at 508-478-1110
Ext. 1121 or by email at
jwalsh@milfordma.com**

Or Register on line at:

<https://www.active.com/milford-ma/running/distance-running-races/milford-special-olympics-road-race-and-walk-2018?int=>



**Special
Olympics
Massachusetts**

Fun Run for Ages 10 and Under

AWARDS

10:15AM for Top Three
Male and Female in
each division

**Sponsored by:
Milford
Community
Program and
FOMASA**

**Mail form and
entry fee to:**

**Milford Special Olympics
31 West Fountain St.
Milford, MA 01757**

**For Internal Use
Only**

Bib# _____

Name _____

Address _____

Phone _____

___ Runner ___ Walker ___ Fun

T-shirt Size: S M L XL (For Pre-registered Road Race and Walk
Participants Only, Fun Run Participants receive Awards)

Sex _____ Age on race day _____

"I know that running in a road race/walk is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the race. I assume all risks associated with running in the race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of acceptance of my entry, I, for myself and for anyone entitled to act in my behalf, waive and release the organizations holding the event, the Milford Community School Use Program, the Town of Milford, and Milford Special Olympics, and the organizers, supervisors, sponsors, participants, and persons transporting me from any claims and liabilities .

Signature _____ Date _____

Signature of parent or guardian if under _____ Date _____