



The Lacon Old Settlers 5K Race\Health Walk is held in conjunction with the city's annual celebration and starts and finishes near the Marshall County Court House Square. Come and enjoy a race with good hospitality, good food and a **GREAT downhill finish.**

Proceeds to benefit :LS52 Ambulance, Fire Dept. and Lacon Old Settlers Association

Awards

IVS Grand Prix Series Race

Male, Female
Div / Places

13 & Under / 1 st , 2 nd , 3 rd	
14-19 / 1 st , 2 nd , 3 rd	45-49 / 1 st , 2 nd , 3 rd
20-24 / 1 st , 2 nd , 3 rd	50-54 / 1 st , 2 nd , 3 rd
25-29 / 1 st , 2 nd , 3 rd	55-59 / 1 st , 2 nd , 3 rd
30-34 / 1 st , 2 nd , 3 rd	60-64 / 1 st , 2 nd , 3 rd
35-39 / 1 st , 2 nd , 3 rd	65-69 / 1 st , 2 nd , 3 rd
40-44 / 1 st , 2 nd , 3 rd	70 + / 1 st , 2 nd , 3 rd

Overall Male/Female & Fastest Lacon Male/Female Health Walkers:

1st Male & Female Walkers

Great Door Prizes! Including a Bike!

Date: 23-Aug-2008

Race Day Registration: 6:30am

Race Time: 7:30am

Toddler Trot: 8:45am

Pre-register by: 18-Aug-2008

Entry Fees:

\$15.00 ea. Family/Friend 4 Pack \$50.00 post marked 18-Aug-2008

\$18.00 ea. Family/Friend 4 Pack \$60.00 after 18-Aug-2008

\$18.00 ea. Family/Friend 4 Pack \$60.00 Race Day Registration

Toddler trot Free (Ages 7 and under)

New this year! Family/Friend 4 PACK :

Enter a group of 4 or more and receive a discount!

4 runners/walkers \$50 before 18 Aug (\$12.50 for each additional runner or walker). \$60 from 19 Aug till Race Day

(\$15.00 for each additional runner or walker)

All participants or parent/guardian must sign waver!

Fill out additional forms more than 4 runners/walkers:

Make checks payable to:
Lacon Old Settlers 5k

Mail form and entry fee to:
Amy Junker
822 N. Santa Fe Ave.
Chillicothe, Illinois 61523

For more information or to volunteer

Call Amy Junker 309 361-0030

New Shirt design guaranteed to pre-registered runners & walkers only. Medallions for all Toddler Trot participants. Results provided by Illinois Valley Striders WWW.IVS.ORG

Thank You to our Sponsors!



Release and Waiver

In consideration for acceptance of my entry, I for myself, my executors, heirs and assignees – do hereby release & discharge the City of Lacon & the Lacon Chamber of Commerce & sponsors & supporters from all claims or damages, demands, actions, whatsoever in any manner arising or growing out of my participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in said event and am physically fit and sufficiently trained to participate in said event.

Name _____	Name _____	Name _____	Name _____
Address _____	Address _____	Address _____	Address _____
City, St. Zip _____	City, St. Zip _____	City, St. Zip _____	City, St. Zip _____
DOB _____ Sex M / F circle	DOB _____ Sex M / F circle	DOB _____ Sex M / F circle	DOB _____ Sex M / F circle
5KRun 5kWalk Toddler Trot	5KRun 5kWalk Toddler Trot	5KRun 5kWalk Toddler Trot	5KRun 5kWalk Toddler Trot
T-Shirt Size: S M L XL circle	T-Shirt Size: S M L XL circle	T-Shirt Size: S M L XL circle	T-Shirt Size: S M L XL circle
Signature _____	Signature _____	Signature _____	Signature _____
Sig. Parent/Guard. for 18&under	Sig. Parent/Guard. for 18&under	Sig. Parent/Guard. for 18&under	Sig. Parent/Guard. for 18&under
Age DOR _____ Date: _____	Age DOR _____ Date: _____	Age DOR _____ Date: _____	Age DOR _____ Date: _____