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* * * **2017** * * *

5K Run/Walk
Sat., December 2nd
Drost Park
Maryville

Date/Time: Saturday, December 2nd, 2017

5K begins at 9:00 am

Race Day Registration begins at 8:00 a.m.

Location: Drost Park in Maryville, IL

(located off Schiber Court behind the American Cancer Society office)

Giveaway: Long sleeved shirts will be provided for entrants registered before November 21st. *Late registrations are not guaranteed a shirt.*

Awards: Medals to top three overall male and female finishers.

Registration: 11 and under - \$10 each (no shirt) or \$20 each (includes shirt).

12 and up - \$20 each (no shirt) or \$30 each (includes shirt).

Entry fees are non-refundable.

Register online at: <https://runsignup.com/Race/IL/Maryville/FrostyFrolic5K>

Packets: ACS office pickup on 12/1/17 from 9:00 am-4:00 pm

8:00 am pickup on Race Day

Information: The Frosty Frolic 5K will be held to raise money for the **American Cancer Society through the Relay For Life events in the Metro East.** After the race, there will be hot chocolate & cookies for runners. Contact Sheena Whitehead with any questions at 618-288-2390 or sheena.whitehead@cancer.org

Registration form on reverse.



Frosty Frolic 5K---Make checks payable to American Cancer Society

Mail this form along with your check to: Attn. Frosty Frolic 5K, #5 Schiber Ct. Maryville, IL 62062

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Circle Event: 5K / Kids Dash # of runners _____ Amount enclosed: _____
Are you running in support of a Relay For Life team? Y / N Relay Team Name _____

Waiver of Liability: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all claims for damages, actions and causes of actions against Carlyle Lake and the American Cancer Society, their affiliates, subsidiaries, officials, representatives, employees, successors, and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and have sufficiently trained for the competition of this run. Further, I hereby grant full permission for the use of my name and/or any photographs, videotapes, motion pictures, recordings, or any other record of this event for legitimate purpose.

Signature: _____
Parent Signature if under 18 _____ Date _____

Additional Registration Forms Below

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____

Name _____ Email _____ Phone _____
Address _____ Age on race day _____
City/State/Zip _____ Circle Gender: Male Female
Circle T-Shirt: Size Youth – M Youth – L Adult – S Adult – M Adult –L Adult – XL Adult – XXL
Signature _____