

National Peace Officers Memorial Day



5K Run/Walk



Saturday, May 15, 9:00 am
Eddie Mundo Jr. Park

- **Date: Saturday, May 15**
- **Time: Race Begins at 9:00 am**
- **Race Day Registration & Packet Pickup: 7:30-8:30 am**
- **Location: Eddie Mundo Jr. Park, La Grange, KY**
- **Registration Fee: \$25 early registration fee until May 1st (guarantees T-shirt); \$30 after May 1st including race day (limited T-shirt availability)**
- **All participants will receive a finisher medal. Age group winners & runners up will receive awards**
- **Proceeds above & beyond race expenses will be donated to the KY Law Enforcement Benefits Foundation**
- **Masks required before and after event, not required during run.**
- **Awards ceremony following event, social distancing encouraged**

Complete & return bottom half of form with check

Name: _____ Email: _____

Gender: _____ Birth Date: _____ Age on Race Day: _____

T-Shirt size (circle one): S M L XL 2XL

By accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the National Peace Officers Memorial Day 5K Run/Walk, the city of La Grange, KY, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 in connection with my participation in this event and personally assume this risk.

I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

Signature & Date:

Parent's Signature if under 18 years & Date:

Make checks payable to: City of La Grange

Mail To:
La Grange City Hall
307 W, Jefferson St
La Grange, KY 40031
502-222-1433