



Walking Iron Park

Saturday May 17th 2014

8:00am: Check in & Late Registration

9:00am: Runners start

9:10am: Walkers start

9:20am: Children's Race

11:15am: award/prize ceremony

On Friday, 5/16, there will be an early check in and late registration from 4-7pm at the District One station



FUNDS RAISED
BENEFIT
YOUR LOCAL
VOLUNTEER EMS!

Registration Form

Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

E-mail Address: _____

RACE CATEGORY:

- | | | | |
|--|---------------------------------------|--|--|
| <input type="checkbox"/> Child under 4 | <input type="checkbox"/> Female 13-18 | <input type="checkbox"/> Female 50 and above | <input type="checkbox"/> Male 30-49 |
| <input type="checkbox"/> Child 4-7 | <input type="checkbox"/> Female 19-29 | <input type="checkbox"/> Male 14-18 | <input type="checkbox"/> Male 50 and above |
| <input type="checkbox"/> Child 8-12 | <input type="checkbox"/> Female 30-49 | <input type="checkbox"/> Male 19-29 | |

T-SHIRT SIZE: (T-shirts are guaranteed if registration is sent post marked 4/30. Registration sent after 4/30, t-shirts will be available while supplies last.)

- | | | | |
|----------------------------------|----------------------------------|----------------------------------|------------------------------------|
| <input type="checkbox"/> Youth S | <input type="checkbox"/> Youth L | <input type="checkbox"/> Adult M | <input type="checkbox"/> Adult XL |
| <input type="checkbox"/> Youth M | <input type="checkbox"/> Adult S | <input type="checkbox"/> Adult L | <input type="checkbox"/> Adult 2XL |

PAYMENT CATEGORY:

- | | | |
|-------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Adult \$20 | <input type="checkbox"/> Child \$8 | <input type="checkbox"/> 1 Adult & 2 or more children \$35 |
|-------------------------------------|------------------------------------|--|

Emergency Contact: _____

Emergency Contact Phone: _____

Emergency Contact Relation: _____

If registering additional children with your contact information, please indicate below:

Child 1 Name: _____

RACE CATEGORY: Child under 4 Child 4-7 Child 8-12

T-SHIRT SIZE: Youth S Youth L Adult M Adult XL
 Youth M Adult S Adult L Adult 2XL

Child 2 Name: _____

RACE CATEGORY: Child under 4 Child 4-7 Child 8-12

T-SHIRT SIZE: Youth S Youth L Adult M Adult XL
 Youth M Adult S Adult L Adult 2XL

Child 3 Name: _____

RACE CATEGORY: Child under 4 Child 4-7 Child 8-12

T-SHIRT SIZE: Youth S Youth L Adult M Adult XL
 Youth M Adult S Adult L Adult 2XL

RETURNING THIS FORM

Make checks and money orders payable to:
Dane County District One EMS

Print and mail registration form with payment and signed waiver to:

District One EMS, Attn: Run/Walk
316 W. Commerical St., Box 505
Mazomanie, WI 53560

Or email district1emsrunwalk@gmail.com with this form attached and provide payment and signed waiver at check in.

I give Dane County District One EMS permission to use pictures that may include me or my child on race day on their facebook page or website

I wish to make an optional donation of \$ _____ to Dane County District One EMS