

20th Annual MUD MOUNTAIN 5K
 Cross Country Classic
 & 1 Mile Fun Run

SATURDAY • July 25, 2015
 8:00 A M



What:

Cross country running on a fun and challenging 5K course.

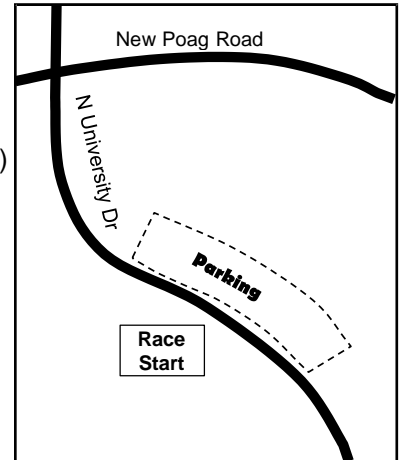
- 5K race starts at 8:00 a.m. (**bib chip timing from Endurance Race Timing!**)
- One-mile fun run immediately following Mud Mountain 5K
- **Performance sport-shirts**, prizes, and awards for top 3 finishers in each age division and Male and Female Team Champions

Where:

- Cross country course at the SIU Edwardsville campus.

Entry:

- Over age 18 - \$25 in advance, \$30 on race day
- 18 and under - \$20
- Under age 11 - \$10
- All Team Entries - \$20 per runner, please mail in team entries together and do not register online. Teams can register on race day for \$25 per runner. Four runners minimum per team. Be sure to include a team name. Teams must be male or female. No mixed teams.
- Make check payable to: "Edwardsville XCTF Booster Club"
- Online registration at <https://entry.iwantregistered.com/hrrmeetsummary.aspx?229> or www.mudmountain.org (Mud Mountain 5K Cross Country Classic)
- Race day registration from 6:30 – 7:45 am



More Info: www.mudmountain.org

Mud Mountain XVIII Official Entry Form

Name: _____ Age: _____ Gender: M F
 Address: _____ Phone: _____ City: _____
 _____ State: _____ Zip: _____
 Email: _____ T-shirt size: XS S M L XL XXL
 Race Entry: _____ 5K Run _____ 1 mile fun run _____ Clydesdale (200 lbs +)
 Team Divisions: Male Team: _____ Female Team: _____

Waiver: I acknowledge that a running event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and/or personal loss. I hereby assume the risk of participating in the Mud Mountain 5K/1-mile race. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows: a) waive, release, discharge, and agree not to sue, from any liability for my death, disability, personal injury, property damage, property theft, or action of any kind which may hereafter occur to me as a result of my participation in the aforementioned events; b) the following persons or entities: C.U.S.D. #7, race director, event volunteers, club members and officers, and all cities, counties, districts in which said event may be staged or in which segments of said events may be run and their officers, directors, employees, representatives, and agents. I agree to allow my photograph, video or film likeness to be used for legitimate purposes by E. C.U.S.D.#7, the event sponsors and/or assigns.

Signature: _____ Date: _____
 Parent signature (if under 18): _____ Date: _____

Mail to: Edwardsville XCTF Booster Club, PO Box 135, Edwardsville, IL 62025