

36th Annual Lamar Free Fair Run

Proceeds benefit the Lamar Chapter Fellowship of Christian Athletes.

Email us at fca@lamar.k12.mo.us

Date: SATURDAY, AUGUST 26, 2017

Registration @ 6:30 AM

Race begins @ 7:30 AM, Fun Run @ 9:00 AM

Meet at the corner of 9th and Broadway in Lamar. Race will begin and finish there.

The course is mostly flat with a few moderate hills and is completely asphalt surface.

The 5K and 10K courses are both certified.

Entry Fees

- \$20.00—if postmarked by Fri 8/18 or dropped off by 3pm on Wed 8/23.
- \$25.00—Late/Same Day Registration
- \$15.00—1 Mile Fun Run

For online registration go to www.localraces.com—OR—fill out and mail registration form below with payment. You may also choose to drop it off at Lamar Middle School, Attn Tamara Cole, or Lamar High School, Attn Colby Hall.



AWARDS

Awards given in each division for the 5K Run, 10K Run, and 5K Walk. 1 Mile Fun Run will receive participation ribbons.

First 100 Registrants are guaranteed a t-shirt.

Sponsored by:



Lamar Bank & Trust Company



417-681-0330



Mail form and entry fee to:
Tamara Cole
Lamar Middle School—FCA
202 W. 7th St.
Lamar, MO 64759
(417) 682-3548, ext 116

OR

Online Registration available at www.localraces.com
 *Processing fee is assessed.

First 100 registrants are guaranteed a t-shirt.

Adult: S M L XL

Youth: 10-12 14-16 18-20

Name _____

Address _____

Phone _____

Circle Race: 10K Run 5K Run 5K Walk 1Mile

Check Division: ___ 13 and Under ___ 14-19 ___ 20-29

___ 30-39 ___ 40-49 ___ 50-59 ___ 60 Plus

Sex _____ Age on race day _____

Entry Release: In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors & administrators, waive and release any and all rights and claims for damages that I may have against the Race and County of Barton, State of Missouri, their representatives, 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 race and my physical condition has been verified by a licensed medical doctor. I will additionally permit the free use of my name and pictures in broadcasts, newspaper articles, telecasts, etc. and I hereby authorize any emergency medical unit to release, any physician designated as an official representative of the race to obtain information (medical or otherwise) relating to my condition resulting from any participation in this event and I further authorize such physician to tactfully use such information in his dealings with the public.

Signature _____ Date _____

Signature of parent or guardian if under 18 years of age. _____ Date _____