4th Annual MJJA 5K for Kids

RUN WALK

WALK

OFFERENCE YOU MAKE.



Missouri Juvenile Justice Association



4th Annual **5K FOR KIDS RUN/WALK** OCTOBER 23, 2019~ 5 P.M.

Margaritaville 5K Course

All proceeds will benefit the "MJJA Juvenile Justice Scholarship Fund" which is an education scholarship designed to assist youth served by the Missouri Juvenile Court who will be pursuing higher education opportunities.

REGISTRATION/DONATION FORM

IAME	AGENCY				
DDRESS_					
CITY	STZIP CODE				
HONE	EMAIL				
	YES, I WISH TO RUN/WALK Age: Male: Female:				
	YES, I WISH TO RUN/WALK AS A VIRTUAL RUNNER/WALKER				
	YES, I WISH TO SUPPORT BUT DO NOT WISH TO RUN *Minimum donation of \$25 to receive a T-Shirt DONATION: \$				
	YES, I WOULD LIKE TO SPONSOR THE RACE AND WISH TO HAVE MY NAME ON THE BACK OF THE T-SHIRT *Minimum donation of \$100 *Please submit your .eps LOGO to vonda@mjja.org*				
	*REGISTRATION FEES \$25 PRE-REGISTRATION- RECEIVED BY October 2, 2019				
	*\$30 LATE REGISTRATION - UNTIL 3 PM October 23, 2019				
	<u>T-shirt Information</u> : Entry fee includes a race T-shirt. (Guaranteed for pre-registered participants) Please check appropriate t-shirt size below. Additional shirts may be purchased at the Conference.				
	Shirts, and Race Details provided @ Conference Registration				
	Small Med Large XL XXL XXXL				
LS AWA	ARDED!! for the Top 3 Male/Female Runners in the Following categories: 25 & under, 26-30, 31-40, 41-50, 51+				
hecks m	nade payable to: Missouri Juvenile Justice Association, Attn: 5K, PO Box 1332, Jefferson City, MO 65102-1332*				

**Mail

You may also submit payment through PayPal from our website: www.mjja.org

(All entrants must sign waiver before entry can be accepted)

I absolve, on behalf of myself and my heirs or assigns, all sponsors, including MJJA, Margaritaville, and anyone involved in this run from any liability for any damages, injury, or illness suffered by me in connection with this run, either during this run or as a result of having participated in it. If I should suffer injury or illness, I authorize officials to use their discretion to have me transported to a medical facility, and I assume full responsibility for this action, completely absolving the aforementioned sponsors and officials of any responsibility thereof.

I hereby grant full permission to any of the foregoing to use my likeness or any other record of the event for legitimate purpose.

Entrant Signature:	Date:	