



MOGADISHU MILE 5K



Where: Fort Rucker Physical Fitness Center Andrews Ave

When: Saturday, October 1st 5K Race begins at 0800.

Details: Race Day registration: begins at 0630 and ends at 0740

Pre-registration packet pick up on FRIDAY September 30th from 1200-1700 at Fortenberry-Colton PFC

Entry Fee:

- Pre-registration fee individual: \$25 by September 25th. \$30 September 26th- Race Day
- Teams: Teams of 8 participants pay \$160 (\$20.00 per team member), by September 25th each additional person pays normal registration fee. On September 26th – Race Day, all teams are \$180. (\$22.50 per team member). Only 8 medals per team. **Top 3 teams** will be awarded streamers.
- No T-shirt option fee is \$15

Pre-Registration:

Pre-registration is highly recommended.

Registration forms will be at both the Fortenberry-Colton Physical Fitness Center and the Fort Rucker Physical Fitness Center, and available to print off on the MWR website

Entry forms can be processed and paid for (with CASH, CHECK or Credit Card) at either Physical Fitness Center

Awards: 5k run

Medals will be awarded to the 5K Overall Female and Male, Grandmaster Female and Male; First Place, Second and Third Place medallions will be awarded for the following age categories: 9 & under, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-59, 60-69, 70 & older for both males and females.

TEAMS: 1st place Medals will be awarded to the 1st place team (top 8 runners).

Streamers will be given to top 3 finishing teams. Team members may run individually and qualify for age category awards.

Sports drinks, water and fruit will be provided for participants.

Questions? Contact: Nicole Crowley phone 255-1951; email: Nicole.r.crowley4.naf@army.mil

MOGADISHU MILE 5K



BIB NUMBER
(staff only)

5K Run

Saturday, OCTOBER 1ST 0800

ENTRY FORM

Circle preferred shirt size:

Small Medium Large X-Large XL (add \$2) NO SHIRT

shirt sizes will be on a first-come, first-served basis for the first 300 participants

Team Name: _____ POC/PHONE NUMBER _____

RELEASE & HOLD HARMLESS AGREEMENT DEPARTMENT OF MORALE, WELFARE, AND RECREATION

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official, relative to my ability to safely complete the run. I assume all risks associated with running, in this event including, but not limited to, falls, contact with other participants, the effects of the weather (including high heat and/or humidity), traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Department of Morale, Welfare, and Recreation Fund and the United States Government, from any liabilities or claims arising from my own participation. I agree that I will never prosecute, or in any way aid in prosecuting any demand, claim or suit against the United States Government for and loss, damage or injury to my person or property that may occur from any cause whatsoever because of taking part in this activity. I also understand and agree that I may be held liable for any damage or loss to the United States Government that is caused by my gross negligence, willful misconduct, or fraud.

PLEASE PRINT CLEARLY

Last Name: _____ First: _____

Date of birth: _____ Age: (as of Oct 1st) _____ Sex: M F

Phone: _____ Email: _____

Signature: _____ Date: _____

(Parent or Guardian must sign if under 18.)

United States Government, as used here, includes Morale, Welfare, and Recreation Activities (MWR) and officer, Agency or employee of the United States Government or MWR Activities acting officially or otherwise. Entry forms can be processed and paid for (with Cash, Check or CC) at either Physical Fitness.

Please do not write below this line. To be completed by MWR Staff



Information has been confirmed



Form is complete

Staff name _____

Date received _____