

Courthouse Classic 5K-2012

Race to Benefit Lakeland Running Teams & Programs

Where: LaGrange County Courthouse, LaGrange, IN.

When: Saturday, June 16th, 2012 - (WALKER'S WELCOME)

1 Mile Fun Run Start Time at 8:30 AM - 5K Start Time at 9:00AM

NEW DISPOSABLE CHIP TIMING: Provided by "Time to Run"

(Race day results can be found at www.timetorun.net)

Race Day Registration: 6:30AM till 8:10AM.

Course: USATF Certified IN 03002 MW

Awards: Top three overall, men & women, Master Champion (40-49), Grand Master (50 & over). The top four in each age division will receive an award. (Overall winners not included)

Age Divisions: 5K Race ... Men and Women 13 & under, 14-15, 16-18, 19-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60 & over. **1 Mile Fun Run** The top 35 children will receive a special medallion! 12 & under in age are eligible for those awards.

Entry...For 5K & Walk \$14.00 pre-registered by 6/09/12 after that day \$17.00

Fun Run...Kids 12 & under \$9.00 pre-registered by 6/09/12 after that day \$12.00

Shirts & "goodie bags" will only be guaranteed to those who pre-register, & will be available to participants on a first come first serve, for race day registrations.

Make checks payable to: Miller's Market's Benefit Run.

Questions: E-mail: info@courthouseclassic.com or call Connie at 260-463-4962 (101) Gary at 260-336-4460 or Dan 260-463-2831 - **Visit our website at www.couthouseclassic.com**

Please detach, sign, fill out, & return this form.

Courthouse Classic 5K Road Race

Last Name	First	sex	age
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Address	City	State	Zip-Code
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Phone # _____

Race: (circle) **5K** **1M FUN RUN** **WALKER**

T-Shirt Size: (circle) **Kids 10-12(M)** **Kids 14-16 (L)** / **Adult** **S** **M** **L** **XL** **XXL**

Waiver: (must be signed) In consideration of this entry being accepted, I, for myself, my heirs, executors, assigns, and administrators, waive and release any and all claims for damages I may have against, any and all sponsors, representatives, organizers, Lakeland Schools, and the City of LaGrange. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and that my condition has been verified by a licensed medical doctor.

Date

Signature (of parent or guardian if under 18)

Mail entries to:

Miller's Market Office (Attn: Connie)

P.O. Box 240

LaGrange, IN. 46761

DOOR PRIZES TOO!