

Callithumpian Canter

5k Race / 1 mile Fun Run / Walk Sunday, October 8, 2023 Fun Run 1:30 p.m. 5K 2:00 p.m.



This race is part of the Adams County Race Challenge Series # Bib timing for all 5 K participants.

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AWARDS: A Men Wor PRE-REGIS to: CALLITE	All pre-registered runners REGISTRATION: Runners Pre-registration:	tly after the completion of the 0-39; 40-49; 50-59; 60-69; 70 9; 30-39; 40-49; 50-59; 60-69 gister by mailing your complemary Friedt 325 N. 9th St. REGISTRATION IS THURS (by deadline date) are gumay register the day of the example of the Pun Run - \$10.00	0 & older ; 70 & older ted entry form a Decatur, IN 46' RSDAY, SEPT aranteed a cus	733 EMBER 22, 202 stom designed ev n 1:00 p.m. – 1:4 0.00	23 vent T-shirt.	
Chip timing for all 5 K runners. GENERAL INFORMATION: Refreshments will be available to PARTICIPANTS ONLY after the race. Restroom facilities will be available. Parking is available on the school's lot. NO PETS ALLOWED. SPONSORS: Adams Memorial Hospital, Krueckeberg Auction & Realty, West End Restaurant, Decatur Dental Services, Custom Car Care, and Adams County Community Foundation. FOR INFO: Linda Morris (260) 724-2604 Mary Friedt (260) 724-3410 Carl Risch (260) 724-8588 Mail to: Callithumpian Committee, P.O. Box 902, Decatur, IN (or) Mary Friedt, 325 N 9th Street, Decatur, IN 46733						
	Female1 mig in the Adams County Racin	ng Challenge Series	yes	no		
	Age DOB City/State					
In considerat Complete Printi Schools, the Cal employees, ager from any and a this event. I und trained to parti- permitting me t	ion of the acceptance of my entring, First Merchant's Bank, ProFedlithumpian Committee, the Decatusts and other entities and individu Il liability and claims for injury or derstand that this release applies to cipate in this event, and recognize to participate in this event is relying deotapes, motion pictures, recording	Waiver and release of all clary into the Callithumpian Canter d Credit Union, Decatur Dental Sear Chamber of Commerce, the Couals who are anyway connected wi illness that I may sustain during my myself, my personal representation the risk of injury accompanying stands upon this release. Further, I here	on October 8, 20 rvices, Custom Ca unty of Adams, the this event(incluny participation in ves, my heirs and ach participation a by grant permission process.	r Care, ACCF, Nor e City of Decatur and ding volunteers assonthis event or in an assigns. I representh and acknowledge the onto any and all of	th Adams Community nd their representative sisting with this event) by other way related to t that I am adequately that the above person in	
Signature: _		Date:				

If participant is under 18 years of age, the signature of a legal guardian is required.

Entry blank must be signed by the participant