Chilly 5K

Del Rio Community Health Improvement Coalition

Saturday, January 27, 2018

7:30-8:00am Check-in and onsite registration

8:30 am Fun Run/Walk Starts

All Active Duty military register for only $15 including on race day (with valid ID).

- Start/Finish at SWTJC 207 Wildcat Dr.
- Event is chip timed via WT Technologies
- Awards will be given to overall and age group top 3 finishers
- A portion of the proceeds will benefit Del Rio Babe Ruth Baseball League
- Healthy snacks and water provided to all participants
- REGISTER ONLINE AT www.chicdelrio.org or MAIL REGISTRATION FORM BELOW

For more information call Ray Torres at 830-298-6315, reynaldo.torres@us.af.mil

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Please make checks payable to CHIC.
Mail registration form & fee to CHIC, 712 E. Gibbs St. Suite 200, Del Rio, TX 78840.

☐ $15 registration until Jan. 19 Beanie to first 150 participants.

☐ $20 registration after Jan. 19 Beanie probable but not guaranteed.

☐ $15 youth 13-17 registration by Jan. 19 Beanie to first 150 participants.

☐ Children 12 and under free; no Beanie unless purchased for $15; MUST be registered.

Name First: _____ Last: _____ MALE ☐ / FEMALE ☐

Mailing Address: _____

Home Phone: ___-___-____ Age ____ Birth date ____/____/____
On event day

Email: _____

Current Base Affiliation: Act ☐ Civ ☐ Contract ☐ Dep ☐ Ret ☐ N/A ☐

I, the undersigned voluntarily waive, discharge and release CHIC and all agencies whose property and/or personnel are used, and other sponsoring or co-sponsoring company(ies), agency(ies), or individual(s) from responsibility for any injuries or damages I may suffer as a result of my participation. I hereby certify that I am in good physical condition and an able to safely participate in this event. I will additionally permit the use of my name and pictures in broadcasts, telecasts, newspapers, brochures, etc. And I also understand that the entry fee is non-refundable and non-transferable. As a participant I certify that all information provided in this form is true and complete. Bib numbers are non-transferable and must be worn on the front of shirt to help insure accuracy of time results. Failure to return the electronic chip transponder will result in a $30 charge. I have read the entry information provided for the event and certify my compliance by my signature below.

Participant's Signature _____ Date _____

☐ **Parent or Guardian's signature if under 18**

If participant if under 18: This is to certify that my son/daughter has my permission to participate in CHIC's 5K and related events, is in good physical condition, and that the event officials have my permission to authorize emergency treatment if necessary.

FOR USE BY RACE ORGANIZERS ONLY

☐ **MALE** / ☐ **FEMALE** **Category:** _____ **RACE #:** _____ PAID: _____