



Kids 10 & under run free!

Thursday, Nov 28; 8 am Arena Park

Note New Location!

Celebrate the Thanksgiving holiday with family and friends! Choose between the 5K and 1-mile Gobble Mini-Trot.

Name _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____

Circle one: Male Female Age on Thanksgiving Day: _____

Are you a current member of Cape Road Runners? Yes No (\$3 discount on registration.)

Choose one: Gobble 5K Gobble 1 mile mini trot Virtual Wobble

Choose one: No Shirt (\$8.00 discount)

- Youth Small Youth Medium Youth Large Adult XS Small Medium Large X-Large XX-Large XXX-Large

*Finisher medals for all runners and walkers. *Timed, certified course, flat and fast *Overall male and female winners *Register online at www.raceentry.com \$25 registration fee \$30 race day. Kids 10 and under run free! *T- shirt for all participants registered by November 15.

I know that participating in the 5K or 1 mile is a potentially hazardous activity and I should not enter and participate unless I am medically able and properly trained. I acknowledge and assume any and all risks associated with this event including, but not limited to, falls, contact with other participants, and the condition of the course, including, but not limited to objects on the course surface. Knowing and appreciating these risks and in consideration of your acceptance of my entry, I hereby for myself, my heirs, representatives or anyone else claiming on my behalf, covenant not to sue, and waive, release, and discharge myTEAM Triumph and the City of Cape Girardeau, its volunteers, and sponsors, and anyone else acting for or on behalf the Gobble Wobble 5K or 1-mile from any and all claims of liability for death, personal injury, or damage of any kind arising out of my participation in this run. This Acknowledgement of Risk and Waiver of Liability extends to all claims of every kind whatsoever. I also consent to emergency treatment in the event of injury or illness. I grant full permission to mTT and/or any person or entity authorized by it to use my name, age, date of birth, finish place and finish time in the public domain. I further grant full permission for mTT to use any photographs, recordings, or any other record of this event for any purpose. My signature acknowledges that I have read the above waiver and I agree and accept all terms and conditions set forth herein.

Name (parent or guardian if under 18) Date

Drop form off at Missouri Running Company in Cape or HealthPoint Fitness in Jackson, or mail to PO Box 121, Jackson MO 63755. Make checks payable to mTT. mTT angels use code mttangel.