

# Butler Dental Group 8th Annual 5K Walk/Run Event

Date: May 19, 2018

Race Time: 8:00 a.m.

The Event will take place rain or shine  
No rain date will be scheduled

Proceeds to benefit  
DeKalb Humane  
Society

To learn more about DeKalb  
Humane Society, Visit  
[www.dekalbhumanesociety.org](http://www.dekalbhumanesociety.org)



## Race Information

260-868-2221

**WE WILL BE USING CHIP TIMING**

Offered by: Dave Devoe

Prizes will be awarded

Parking Available at the Butler  
American Legion. Please watch for signs



## ENTRY FEE

\$15 for pre-registration and  
day of race registration.  
\$5 registration fee for pets  
Includes pet bandana

\*Goody bags & T-shirts to all  
pre-registered participants.

\*Must be registered before the  
April 27th deadline to receive a  
T-shirt and goody bag.

The race will start at the office of  
Butler Dental Group  
106 E. Green St  
Butler, IN 46721

**Registration day of race  
starts at 7:00 a.m.**

**Pre-registration Deadline:  
April 27, 2018**

**WAIVER:** I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able & properly trained. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including heat and/or humidity, the conditions of the road & traffic on the course, all such risks being known & appreciated by me. Having read this waiver & knowing these facts, & in consideration of your acceptance of my application, I, for myself & any one entitled to act on my behalf, waive & release Butler Dental Group & any member of his staff from all claims of liabilities of any kind, including any claims arising out of negligence of the aforementioned parties, arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs or any other record of this event for any legitimate purpose.

Print name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Check One: 5K WALK \_\_\_\_\_ 5K RUN \_\_\_\_\_ Age \_\_\_\_\_ Male / Female \_\_\_\_\_ Pet Registration/Bandana \$5 \_\_\_\_\_

**CIRCLE A T-SHIRT SIZE FOR THOSE THAT REGISTER PRIOR TO April 27, 2018**

ADULT SIZES: S M L XL XXL XXXL YOUTH SIZES: S (6-8) M (10-12) L (14-16) XL (18-20)

Make checks payable to Butler Dental Group. Mail registration form and check to : P.O. Box 17, Butler, IN 46721  
\*\*ALL PARTICIPATES MUST START AT THE OFFICAL RACE TIME TO BE INCLUDED IN THE OFFICAL RACE RESULTS\*\*