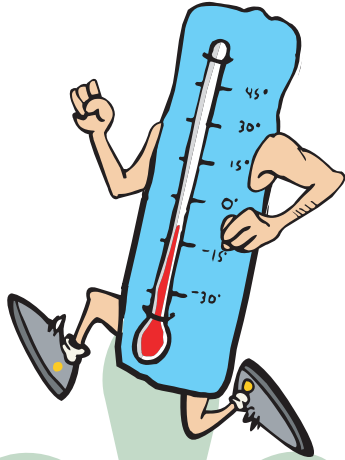


3RD ANNUAL
St. Joan of Arc
Frostbite 5K
RUN/WALK



FEBRUARY 27, 2010

10:30 START

RAIN OR SHINE (SNOW TOO!)

St. JOAN OF ARC
120 NASHOTAH ROAD
NASHOTAH, WISCONSIN 53058



REGISTER ONLINE: WWW.ACTIVE.COM

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RACE INFORMATION



COURSE: SCENIC ROAD COURSE THAT IS OUT AND BACK WITH ROLLING HILLS. ONE WATER STATION AT 1.5 MILE MARK.



REGISTRATION: \$20.00 EARLY BIRD POST -MARKED BY FEB 24.

CHECK IN: \$25.00 DAY OF RACE
 CHECK IN AND RACE PACKET PICK UP WILL BE FROM 8:00 AM TO 9:30AM RACE DAY ONLY. ALL PRE-REGISTERED RUNNERS/WALKERS ARE GUARANTEED A FROSTBITE 5K T-SHIRT EACH RUNNER/WALKER WILL RECEIVE A GOODIE BAG.

TIMING WILL BE HANDLED BY:



AMENITIES: REFRESHMENTS FOLLOWING THE RUN/WALK. BEER, LIGHT SNACKS AND **LIVE MUSIC** FROM



VISIT US ONLINE: WWW.ACTIVE.COM
 OR AT WWW.BADGERLANDSTRIDERS.ORG

AWARDS

TROPHIES TO OVERALL MALE/FEMALE
 SPECIAL AWARD TO TOP DIVISION
 WINNERS IN THE FOLLOWING AGE GROUPS:
 10 AND UNDER, 11-15, 16-19, 20's, 30's, 40's
 50's, 60's AND MASTER.

ENTRY FORM

PHOTOCOPIES ACCEPTED.

ST. JOAN OF ARC RUN/WALK ENTRY FORM
 FEES MUST ACCOMPANY THIS FORM, NO REFUNDS.

FORM MUST BE FILLED OUT FOR EACH PARTICIPANT.

NAME: _____

ADDRESS: _____

PHONE: _____

SEX: M F BIRTHDATE: _____ AGE: _____ S
 5K RUN 2 MILE WALK

WAIVER: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely compete in the run. I assume all risks associated with running in the event including but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive, and release St. Joan of Arc Parish Church and School, race officials, the city of Delafield from all claims and liabilities of any kind arising out of participation by me, or any of my minor children in this event. I am eligible for this competition.

Signature: _____

Parent Signature: _____
 (if under 18)

MAKE CHECKS PAYABLE TO: ST. JOAN OF ARC
SEND REGISTRATION TO:
BRIAN BORKOWSKI
752 ADAMS ST., OCONOMOWOC, WI 53066



ANY QUESTIONS PLEASE CONTACT RACE DIRECTOR:
BRIAN BORKOWSKI
 262-560-0307 OR 5BORKOWSKI@CHARTER.NET