

MIRACLE ON MAIN STREET

JINGLE BELL FUN RUN

3 MILE COURSE

SATURDAY, DECEMBER 9TH, 2017

Contact:

Rita Witte - (509) 750-6183 or email: ephratawachamber@gmail.com

Time: Registration is from 2 p.m. - 2:50 p.m. at the old AmericanWest Bank location (Behind Horizon Credit Union), 261 Basin ST SW, Ephrata

Runners will assemble at 2:50 p.m. for pre-race instructions. Race starts promptly @ 3 p.m.

Entry Fee: Advanced Registration: \$20 (NO SHIRT \$15)
Family Entry Fee: \$65 for family of four (PRE-REGISTRATION ONLY)
\$10 each additional family member

ADVANCED REGISTRATION MUST BE RECEIVED BY DEC. 6th TO GUARANTEE T-SHIRT ON RACE DAY

DAY OF RACE: \$25 (NO SHIRT \$20)

Please make checks payable to: Ephrata Chamber of Commerce, PO Box 275, Ephrata, WA 98823

All fees non-refundable

*****ENTRY FORMS MUST ACCOMPANY PAYMENT*****

Course and Distance: The race will begin on Basin Street at the old AmericanWest Bank. Begin down Basin Street, left at Lee Theater (4th Ave NW), right on Frey Rd. Continue down Frey Road until coming to sign directing turnaround point. Turn back down Frey Road, by high school, left on 4th Ave., back down Basin Street finish at beginning location (old AmericanWest Bank parking lot).

Facilities: First aid available on the course and at finish line. Restroom facilities available at ERC.

Age Division: 0 -9, 10-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

Awards: Prize to top male and female overall and top male and female in each age division.

*****RETURN THIS SECTION WITH ENTRY FEE *****

(Mail to Ephrata Chamber of Commerce, PO Box 275, Ephrata, WA 98823 or drop off at the City of Ephrata)

PLEASE PRINT CLEARLY

Name: _____ Sex (M/F) _____

Address: _____ City _____ Zip _____

Age on day of race: _____ Phone: _____

T-Shirt Size (please circle): YM YL AS AM AL AXL AXXL No shirt

WAIVER: In consideration of your accepting my/ my child's entry, I hereby consent to participation in the herein described activities by the child named herein and I hereby, for myself, my child, my heirs, executors and administration to hereby expressly and forever waive and release any and all claims against and agree to hold harmless the City of Ephrata, Ephrata Chamber, City of Ephrata Recreation Department, Ephrata School District 165 and all their respective officers, employees, agents, representatives, successors, or assigns of any kind from any and all claims which may be made for damages and/or injury to property or persons occasioned by cause whatsoever, arising as a result of or in connection with the participation of me or my child in the herein mentioned activity. By participating in the herein mentioned activity, I, or my child understand the potential risk for injury. I also agree to allow any photos or pictures taken during the activities to be used in promotions or activities offered by the City of Ephrata of Ephrata Chamber.

***ALL PARTICIPANTS UNDER THE AGE OF 18 MUST HAVE A PARENTS SIGNATURE.**

Signature: _____ Date: _____

Parent's Signature*: _____ Date: _____