



RENDEZVOUS DAYS 5K Run/Walk



Date: Saturday, September 28, 2024 at 8:30 A.M., Rain or Shine

Where: Registration at the shelter in the park by the Fort Atkinson Community Center.

Race day registration begins at 7:30 A.M.

Registration: Pre-register by September 20, 2024 to receive a T-shirt. Registrations will be accepted up to race time, but not guaranteed a t-shirt. All 5 K participants will receive a post-race snack. Finishing time & places will be available. Entry Fee: \$ 25.00 WITH a tee shirt.

**SPONSORED BY: FRIENDS OF FORT ATKINSON
(proceeds toward Rendezvous Expenses)**

**Entry Form: Please mail to: Fort Atkinson Rendezvous 5 K Walk/Run, P.O. Box 31
Fort Atkinson, IA 52144. (Make Checks payable to Friends of Fort Atkinson)**

Participant Name: _____

Address: _____

Phone: _____ **Email:** _____

Gender: Male Female **Age:** 0-13 14-19 20-29 30-39 40-49 50-59 60-69 70+

T-shirt Size: S M L XL XXL **Youth:** S M L

Entry Fee: \$25 (Pre-registrations receive a t-shirt)

All runners/walkers assume their own responsibility for safety. The course is located on city streets, county road and gravel ending at the State Park/Rendezvous entrance/flagpole. Due to the nature of the event, please bring I.D. **Waiver:** In consideration of acceptance of my entry, I hereby for myself, my heirs and my executors, waive and release any and all rights and claims for damages against the City of Fort Atkinson and the Friends of Fort Atkinson Rendezvous and its committee, sponsors, officials, volunteers and workers for any and all injuries suffered by me in connection with the 2024 Rendezvous Days 5K Walk/Run. I further certify that I am in adequate physical condition to participate in this event. I give my permission for free use of my name and picture in any print media or broadcast account of the 2024 Rendezvous Days event.

Entrant's Signature: _____ **Date:** _____

Parent or Guardian Signature if under 18: _____