

## ELIMINATOR MOUNTAIN BIKE RACE, Benefit for Josh Hammond

- Sponsored by the Clark County Park District & Clark County Trails Coalition
- Event routes off-road trails
- Event begins @ 8:00 am CST (at the Trail Head)
- Registration: 7:00 am – 7:45 am IL time (at the Trail Head in the Pavilion).
- Entry fees are **non-refundable**.
- T-shirts & 1 meal ticket are included in the registration fee.
- After the event, participants can enjoy lunch, awards, and the band *BAILOUT* will be performing.
- Proceeds will benefit Josh Hammond who is battling stage 4 lung cancer.
- For race specifics/rules, or more information about the benefit, please visit our Facebook page The Fay Pickering Memorial Mountain Bike & Hiking Trails or call (217) 808-2803 or visit [bcpickering78@gmail.com](mailto:bcpickering78@gmail.com)
- Return registration forms to: Josh Pickering, 217 E Union St., West Union IL 62477
- Make checks payable to: CCPD

Participant Information		
Last Name:		First Name:
Address:		Contact Number:
City:	State:	Zip:
Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Email address:		
Emergency Contact #:		BIB # -
_____ <b>Deadline for fee due 08/01/17: \$50.00</b> _____ T-Shirt: size: YS, YM, YL, S, M, L, XL, (_____, +\$2 for shirts XXL and above) _____ Total event fees submitted		
Event shirts will be ordered on 08/02/17. No additional shirt orders will be made after this date. Unclaimed shirts will become property of CCPDTC 14 days after the event. Make checks to: Clark Co Park District and send with entry form to 20482 E. Park Entrance Rd. Marshall, IL 62441		
Please read and sign below before submitting entry		
<small>I know that running/walking is a potentially hazardous activity that could cause injury or death. I should not enter and run/walk unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision of the event organizer relative to any aspect of my participation in this event, including the right of any organizer to deny or suspend my participation for any reason whatsoever. I assume all risk associated with running/walking in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including temperature and/or humidity, traffic and the conditions of the road/trail, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my entry, I for myself and anyone entitled to act on my behalf, waive and release the Clark County Park District Trails Coalition, its officers, agents, servants, employees and event sponsors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I understand pictures and video will be taken during the event and used on media sources after the event. I give permission for my picture and or video image to be used for promotion of the event in the future.</small>		
Signature: _____		Date: _____
Parent/legal guardian if under 18 yrs of age: _____		Date: _____