



Eleventh Annual

Chilly Chippewa

5K Run and 1mi Run/Walk

Saturday March 3, 2012—10:00 am

Part of the Indianhead Track Club race series



Sponsor: Chippewa Falls High School Cross Country Team

Location: Chi-Hi main parking lot Registration/awards in cafeteria.

Time: 10:00am for 5K 11:00am for 1mi 11:30am awards

Registration: \$15 before race, \$20 day of race \$40/50 family max



Awards: 5K Awards

Custom Plaque to 1st male and female
Medals to top 2 M&F in the below age groups:
14-under, 15-19,20-29,30-39,40-49,50-59,60-69,70+

1mi Awards

Custom Plaque to 1st male and female
Ribbons to top 1 M&F in the below age groups:
10-under, 11-13,14-16,17-19,20-29,30-39,40-49,50-59,60+

Contact: CHUCK HULL chuckhull@gmail.com

Team website: <http://athletics.chipfalls.k12.wi.us/crosscountry/>

You are invited to join us for the 11th annual Chilly Chippewa races. This event helps support the Chi-Hi cross-country team, and offers a chance to get your first outing of the new season. We have changed the races this year with the hope of attracting more youth, along with those not quite ready to tackle the 5K. The 5K course is virtually the same, just a one block difference on two turns. The one mile is brand new, and is a simple lap around the block from Chi-Hi. Please be prepared for anything, as the roads could be completely clear or covered with ice/snow. The cross-country team will once again be providing a variety of chili dishes, plus snacks and water after the race.

This year, all entrants will receive a customized stocking cap.

Make check payable to: **Chippewa Falls High School**

\$15 before race day \$20 on race day Race 5k___ 1mi___

Mail entries to: Chuck Hull, 510 W Grand Ave., Chippewa Falls, WI 54729

Name _____

Street _____

City/State/Zip _____

Telephone _____ Email _____

Birth Date _____ Age _____ Sex _____

In consideration of your acceptance of my entry, I the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators waive and release any and all rights and claims for damages I may have against the Chippewa Falls School District, Chippewa County, City of Chippewa Falls, and their employees for any and all injuries suffered by me in said event and verify that I will participate in this event as a footrace entrant, that I am physically fit and have sufficiently trained for the competition and completion of this event and that my physical condition has been verified by a licensed Medical Doctor. I hereby grant full permission to any and all foregoing to use any photographs, videotapes, or any other record of this event for any legitimate purpose without financial remuneration to me or my heirs or assigns