

The Edwardsville Cross Country and Track & Field Booster Club Presents:



# MUD MOUNTAIN XIII

SATURDAY • July 26

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## What

5K cross-country race and 1-mile fun run.

- The 5K race starts 8:30 a.m., followed by the 1-mile Fun Run at 9:00 a.m.
- Awards for top 3 male and female finishers in each age group, plus top 3 finishers in the Clydesdale division for runners 200 lbs and up.

## Where

Southern Illinois University Edwardsville campus.

## Entry

- Over age 18: \$15 in advance, \$20 on race day
- Age 18 and under: \$15 always
- Under age 11: \$5
- Make check payable to: "Edwardsville Cross Country and Track & Field Booster Club"
- Pre-race packet pickup at BIPOD in Edwardsville on July 25, or at the course on race day starting at 7:00 a.m.

## Questions?

Visit [www.mudmountain.org](http://www.mudmountain.org) or call Tom Atwood (618) 692-1464

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### Mud Mountain XIII Official Entry Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M F  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ T-shirt size: \_\_\_\_\_  
Race Entry: \_\_\_ 5K Run \_\_\_ 1 mile fun run \_\_\_ Clydesdale (200 lbs +)

**Waiver:** I acknowledge that a running event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and/or personal loss. I hereby assume the risk of participating in the Mud Mountain 5K/1-mile race. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows: a) waive, release, discharge, and agree not to sue, from any liability for my death, disability, personal injury, property damage, property theft, or action of any kind which may hereafter occur to me as a result of my participation in the aforementioned events; b) the following persons or entities: C.U.S.D. #7, race director, event volunteers, club members and officers, and all cities, counties, districts in which said event may be staged or in which segments of said events may be run and their officers, directors, employees, representatives, and agents. I agree to allow my photograph, video or film likeness to be used for legitimate purposes by C.U.S.D. #7, the event sponsors and/or assigns.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent signature (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

Mail entry form to: Edwardsville XC and Track & Field Booster Club, PO Box 135, Edwardsville, IL 62025