

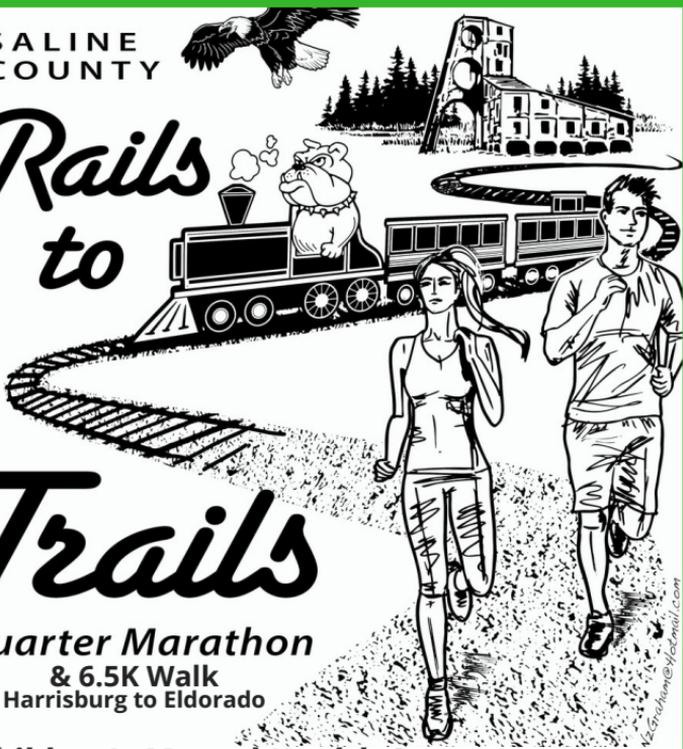
6th Annual

SALINE COUNTY

Rails to

Trails

Quarter Marathon & 6.5K Walk Harrisburg to Eldorado



Supporting Children's Mental Health Awareness

SATURDAY MAY 19, 2018

8:00 A.M.

All proceeds to Southeastern Illinois Community Health Coalition

Events:

2 Events: 1/4 Marathon Run (6.55 miles) or 6.5k Walk (4 miles)

Overall medals to Top 2 Males and Females in events

Medals to Top 2 males/females in age divisions:
14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

Timing by River to River

Registration:

\$20 Includes T-shirt if registered by May 6
Registration form on back.

Online registration provided by www.river2river.net

To register online:

<https://runsignup.com/Race/IL/Eldorado/SalineCountyRailstoTrailsQuarterMarathon>

Parking, registration and the end of race will be at the Egyptian Health Dept., 1412 US 45 N., Eldorado, IL.

Indoor restrooms available at the Health Dept. before & after the race.
Water & snacks provided after the race.

Transportation from the EHD to the starting line will be provided by RIDES Mass Transit.
Check-in & walk up registration begins at 7:00 a.m.

For more information, please contact Jamie Byrd 618-273-3326 EXT 2155
or jbyrd@egyptian.org or visit our Official Facebook Event:

6th Annual Rails to Trails Quarter Marathon & 6.5K Walk



scan me for more details!



Rails to Trails Registration Form

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

Date of Birth: ____/____/____

Sign up for (circle one): Run Walk

T shirt Size (circle one): S M L XL XXL

**Please make checks payable to SICHC.
Send registration form and payment in to:**

**Jamie Byrd
1412 US 45 N.**

Eldorado, IL 62930.

Registration must be received by May 8 to guarantee shirt

Waiver and Release

I, have signed this entry form intending to be legally bound, hereby for myself, my heirs, executors, and administrators and release any and all rights and claims for damages I might have against the Saline County Rails to Trails Race Committee, and officials and other sponsors of this event and their representatives for any and all injuries suffered by me in the event. I attest that I am physically fit and have sufficiently trained for the event and a licensed medical doctor has verified my physical condition. Furthermore, I hereby grant full permission to any and all of the foregoing to use my photograph or any other record of this event for any legitimate purpose. This entry is invalid unless signed by the entrant. If entrant is under 18 years of age then entry must be signed by parent/guardian. The official race director reserves the right to reject any entry.

Signature _____ Date: _____

Parent/Guardian (If under 18 years old) _____