



Arts Alive Memorial Run/Walk

Saturday, April 16, 2011

Baer's Beverage, Inc. Warehouse
7205 Zinser Avenue, Weston

Online Registration Available at www.artsaliveweekend.com

Questions Call Jim Lee, Race Director at (715) 842-5596

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

___ Male ___ Female Phone _____ Email Address _____

Age Group on the Day of Race (check one)

- | | | | |
|-------------------------------------|--------------------------------|--------------------------------|------------------------------------|
| <input type="checkbox"/> 12 & Under | <input type="checkbox"/> 20-29 | <input type="checkbox"/> 50-59 | <input type="checkbox"/> 80 & Over |
| <input type="checkbox"/> 13-15 | <input type="checkbox"/> 30-39 | <input type="checkbox"/> 60-69 | |
| <input type="checkbox"/> 16-19 | <input type="checkbox"/> 40-49 | <input type="checkbox"/> 70-79 | |

- | | | |
|--|---------|---------|
| <input type="checkbox"/> 5 Mile Run/Walk - before 4/10/2010 | 11:00am | \$20.00 |
| <input type="checkbox"/> 5 Mile Run/Walk - after 4/10/2010 | 11:00am | \$25.00 |
| <input type="checkbox"/> Tax Deductible gift to support hospice and palliative patients and families \$_____ | | |

To pay by credit card please see reverse side

TOTAL _____

T-Shirt Size (Shirts cannot be guaranteed to registrants after 4/10/2010 or same day registration)

- S** **M** **L** **XL** **XXL**

Kids are also welcome to join in the fun. 100yd dash (6 & Under) and 1/2 mile race (12 & Under). Registration is FREE and available the day of the event from 9:30 to 10:00am. The races will begin at 10:15 and 10:30am. Participation ribbons and 1st place awards.

****RAFFLE - RAFFLE****

****WIN THIS BIKE****

****RAFFLE - RAFFLE****

KHS Westwood Hybrid

Retail value - \$439



Raffle Tickets:

\$5.00 each OR

Five for \$20.00

Waiver: In consideration of the acceptance of my entry, I myself, executors, heirs, personal representatives, successors, administration, and assignees do hereby release and discharge the race organizers, Baer Beverage, Inc., Aspirus Health Foundation, Inc. and all sponsoring organizations, supporters, volunteers, officials and individuals associated with this run of all claims, damages, injuries, or action suffered by me or arising out of my participation in this run. I attest and verify that I have full knowledge of the risks involved with this event and I am physically fit and sufficiently trained to participate in the event.

Signature _____ Date _____

(Parent/Guardian Signature if applicant is under 18 years of age)

Mail Completed Application with fee enclosed to:

Aspirus Health Foundation/Arts Alive Weekend • 425 Pine Ridge Blvd. • Wausau, WI 54401

Arts Alive Credit Card Payment

Name _____

Company (If Applicable) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ E-mail _____

Visa Mastercard Discover

Credit Card Number _____ Expiration Date _____

CSC Code* _____ * CSC Code is the three-digit number found on the far right side of the signature strip on the back of the card.

Total amount to be charged to credit card: \$ _____

Cardholder's Signature _____ Date _____