



# SPIRIT OF GIVING 5K RUN & WALK

BENEFITTING



## SATURDAY, DECEMBER 14, 2019

Proceeds Benefit Youth Recreation Programs and Modesto Gospel Mission

### • Pre-Registered Packet Pick-Up • 12/13/19

Vintage Fair Mall, 3401 Dale Rd, Modesto



### • Race Day Registration/Pick-Up • 7:00-8:00 AM

Tenth Street Plaza • 1010 Tenth Street

### • 5K Run & Walk • 8:30 AM

### • Wheelchair Division

### • Children's Fun Run • FREE! • 9:45 AM

### • Medal Pick-Up • 10:00 AM

Medals will be presented to 5 year age group winners.

All participants will receive a commemorative finisher medal!

### \$35 Adult • \$15 Child (12 & Under)

Wheelchair Division

FREE - Kids Fun Run

Make checks payable to:

ShadowChase Running Club –

Memo: Spirit of Giving 5K Run

Mail to: ShadowChase Running Club Attn:

Mike Araiza

P.O. Box 3605

Modesto, CA 95352

To use your credit card, please register online.

**\*\* Bring Canned Food for Local Charities and be entered into a drawing for great raffle prizes! \*\***

**For more information, visit [www.modestospiritofgiving.org](http://www.modestospiritofgiving.org) or call Mike at (209) 480-8599**

Early Entry Fee:

\$35 ADULT (13+)  \$15 CHILD (12 AND UNDER)  Wheel Chair

Late Entry Fee (After 11/18/19):  \$40 ADULT (13+)  \$20 CHILD (12 AND UNDER)

**\$5 discount per adult entry for groups of 10 or more adults.**

**Registration must be received by December 1st for group discount.**

\*Shirt Size not guaranteed for registrations received after 12/1/19

FIRST NAME: (One form per person please)

LAST NAME:

M.I.

GENDER

DATE OF BIRTH

 /  / 

AGE ON RACE DAY:

DAY PHONE:

 (  )  - 

EXT:

EMAIL ADDRESS: Your email address will only be used for event communication. It will not be sold to outside parties.

T-SHIRT SIZE

ADULT (XS-3XL)  
 YOUTH (S-L)

ADULT

Male  
 Female

ADDRESS:

CITY:

STATE:

ZIP CODE:

### WAIVER & RELEASE

I, the undersigned, understand that no refunds will be issued. I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I hereby certify that I am in good health and I have trained to run the distance of the race, which I am entering. I assume all risks associated with running in this event. Having read this waiver and knowing these facts and in consideration of your accepting my entry to run in this race, I, for myself and anyone entitled to act on my behalf, waive and release the Shadow Chase Running Club, the City of Modesto, its officers, directors, agents, volunteers and employees, 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 grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

SIGNATURE OF PARTICIPANT

DATE

SIGNATURE OF PARENT/GUARDIAN (If participant is under 18)

DATE

\* for more information, visit [modestospiritofgiving.org](http://modestospiritofgiving.org)

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