

Entry Fee

Pre-Race \$20/Race Day \$25

All pre-registered participants will receive a technical t-shirt. T-shirts in adult sizes only.

Chip timed finish.

Age	Program #
14 & under	3500-4
15-19 years	3501-4
20-24 years	3502-4
25-29 years	3503-4
30-34 years	3504-4
35-39 years	3505-4
40-44 years	3506-4
45-49 years	3507-4
50-54 years	3508-4
55-59 years	3509-4
60-64 years	3510-4
65-70 years	3511-4
70+ years	3512-4

Healthy Living Expo

8:00 am - 12:00 pm

Birchwood Recreation Center

This expo will provide a great opportunity for attendees to learn about the fitness and environmental opportunities available in the Palatine area. Admission is free.

- Exhibitors
- Personal Trainers
- Raffles
- And more!
- Fitness class demos

Participating Exhibitors

Allied Air Conditioning & Heating Corporation
Carrie Nelson, DPM
Castle Chiropractic
Dr. Robert Gerowitz Optometrist
Grundy Family Chiropractic
Health Source of Deer Park
Lights for Learning
Mikes Bike Shop
Palatine Police Task Force
Planet Chiropractic
Seattle Sutton's Healthy Eating
Sleigh Family Chiropractic
Whole Foods Market, Palatine

Taste of Healthy Living Kick-Off Event

Saturday, March 10, noon-3 pm

Whole Foods Market, Palatine

For event details visit www.palatineparks.org.

Palatine Park District
250 E. Wood Street
Palatine, IL 60067



Palatine Park District Healthy Living 5K Run/Walk



March 24, 2012

Sponsored by:



GRUNDY
FAMILY CHIROPRACTIC, S.C.



RAYMOND E. LAVIGNE, DDS AND ASSOCIATES

Planet  Chiropractic

Starting Time

5K Run/Walk

9:00 am

Healthy Living 5K Entry Form*Please fill out completely. Waiver must be signed.***FOR OFFICE USE ONLY**CA CK CG R NR
SR SCH EMP

checked by _____ date _____

processed by _____ date _____

PLEASE PRINT**Race Site**Birchwood Recreation Center
435 W. Illinois Avenue
Palatine, IL 60067Date _____ Payment being made by _____
(last name) (first name)

Home address _____ Apt. # _____

City/State/Zip _____

Primary Phone _____ Work/Cell Phone _____ Email _____

Registration

Registration available at:

- Community Center, 250 E. Wood Street
- Birchwood Recreation Center, 435 W. Illinois Avenue
- Falcon Park Recreation Center, 2195 N. Hicks Road
- Online at www.palatineparks.org by noon Saturday, March 17.
- By mail to: Palatine Park District, 250 E. Wood Street, Palatine, IL 60067

Registrations received after the deadline will be returned.**Race Day Registration**

Race Day registration will be held at Birchwood Recreation Center from 8:00 - 8:45 am.

Prog #	Registrant's Full Name	*T-Shirt Size	Gender	Birthdate	Fee

Drop off or mail to: Palatine Park District c/o Healthy Living 5K
250 E. Wood Street, Palatine, IL 60067***T-Shirt Sizes**
Adult S, M, L, XL, XXL
Sizes are not guaranteed.**Total \$****Check payable to Palatine Park District**Method of payment: Cash Check Visa Mastercard Discover

Card # _____ Exp Date _____

Print Name _____ Signature _____

Awards

First place awards will be given to males and females in each age classification.

Packet Pick-up

Packet pick-up will be available at the Birchwood Recreation Center, 435 W. Illinois Avenue, on Thursday, March 22 and Friday, March 23 from 8:30 am - 7:00 pm as well as on race day beginning at 8:00 am.

No dogs, strollers, roller blades on the course. No gear check available at the event.**Information**

For more information, volunteer opportunities or to obtain additional entry forms call 847-991-0333.

ALL PARTICIPANTS MUST SIGN THIS SECTION

By their very nature, many Park District programs involve body contact, substantial physical exertion, emotional stress, and/or use of equipment which represents a certain risk. It is recommended that you check with your physician prior to participating in Palatine Park District activities. Palatine Park District does not provide insurance protection for participants in Park District activities. Please read the following information carefully and be aware that in registering yourself or your minor child/ward for participation in the above program(s), you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the above program(s). I give my child permission to participate in this program, trip, or activity and hereby waive, release and forever discharge any and all claims against the Village of Palatine, Palatine Park District or its commissioners, employees, or volunteers for damages and/or injuries to the registrant, which may arise from participation in Palatine Park District programs. EMERGENCY TREATMENT: A minor may not be treated, even in an emergency, except when, in the opinion of the attending physician, a life is in the balance. Written consent is required for all treatment given in any hospital emergency room/center. Consent of a parent or legal guardian is necessary for unmarried minors, under 18, except in cases of extreme emergencies. TO WHOM IT MAY CONCERN: As a parent and/or legal guardian, I do herewith authorize the treatment by a qualified and licensed medical doctor of the above minor in the event of a medical emergency which, in the opinion of the attending physician may endanger his/her life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me. The release form is completed and signed of my own free will with the purpose of authorizing medical treatment under emergency circumstances in my absence. Please list specific medical allergies, medicines, or other conditions on a separate piece of paper to be attached to this form.

Signature (If under 18, parent/guardian's signature) _____

Family (if under 18, parent/guardian's signature) _____

Name #1 _____ Name #4 _____

Name #2 _____ Name #5 _____

Name #3 _____ Name #6 _____