The 6th Annual Alton Miles for Meso - 5K Race & 2K Fun Run/Walk

Taking the Fight against Mesothelioma Cancer to the Streets www.milesformeso.org

The Alton Miles for Meso race, a 5K fundraising race and 2K fun run/walk presented by Simmons Hanly Conroy and coordinated by the Metro Tri Club, will return to Alton on Saturday, Sept. 27, 2014.

Since 2009, the Alton race has raised $125,000 for meso research.

Times for Sept. 27 Race Day

Race Day Registration: 7:30 - 8:45 a.m.

Start Time for 5K Run/2K Fun Run: 9:00 a.m.
Award Ceremony: 10 a.m.

Location

Simmons Hanly Conroy, One Court St., Alton, IL

Entry Fees

$25 before 8/31, $30 Sept 1 - 19, $35 Sept. 20 - 27. All participants will receive a long-sleeve T-Shirt.

Prizes

Cash awards will be given to the top 5 overall 5K Fun Run runners.1st Place: $500 | 2nd Place: $250 | 3rd: $200 | 4th: $100 | 5th: $50. Medals will be awarded to 1st-3rd in 5-year age groups.

Race Proceeds Benefit

The Asbestos Disease Awareness Organization

Make Registration Checks Payable To:
ADAO

Mail Entries To:

Miles for Meso, c/o Metro Tri-Club,
P.O. Box 904, Edwardsville, IL 62025

SIMMONS HANLY CONROY
A NATIONAL LAW FIRM

Metro Tri Club

Alton Miles for Meso - Family Entry Form

Register online & create a team at: www.milesformeso.org/register

_____ / _____ / _____ / O YS O YM O YL O S O M O L O XL O 2X O3X
Head of Household | Age on Race Day | Sex: M, F or Clydesdale (200+ lbs) | Select Shirt Size
Race choice (choose one): O 5K Age Group (3.1 miles) O 2K Fun Run/Walk O T-Shirt only

_____ / _____ / _____ / O YS O YM O YL O S O M O L O XL O 2X O3X
Name | Age on Race Day | Sex: M, F or Clydesdale (200+ lbs) | Select Shirt Size
Race choice (choose one): O 5K Age Group (3.1 miles) O 2K Fun Run/Walk O T-Shirt only

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Race choice (choose one): O 5K Age Group (3.1 miles) O 2K Fun Run/Walk O T-Shirt only

_____ / _____ / _____ / O YS O YM O YL O S O M O L O XL O 2X O3X
Name | Age on Race Day | Sex: M, F or Clydesdale (200+ lbs) | Select Shirt Size
Race choice (choose one): O 5K Age Group (3.1 miles) O 2K Fun Run/Walk O T-Shirt only

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

I am including my registration fees in the amount of $_____

I am enclosing an additional donation amount of $_____

I will not run/walk, but would like to buy _____ T-shirts at $25 each for a total of $_____

I want to join an existing team: (team name)_____

Note: New teams can only be created by registering online: www.milesformeso.org/register

Grand Total Enclosed $_____
(Make Checks Payable to ADAO)

Wavier and Release Form (MUST READ):

I acknowledge that a running/walking event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. I HEREBY ASSUME THE RISK OF PARTICIPATING IN THE Miles for Meso Run/Walk. I hereby take action for myself, my executors, administrators, heir, next of kin, successors, and assigns as follows: a) WAIVE, RELEASE, DISCHARGE, AND AGREE NOT TO SUE, from any and all 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 event. b) The following persons or entities: METRO TRI CLUB, City of Alton, Simmons Hanly Conroy LLC, race director, event volunteers and all cities, counties, districts in which said event may be staged or in which segments of said event may be run and its (their) officer, directors, employees,representatives, and agents and volunteers. I hereby consent to receive treatment in the event of my injury, accident and/or illness during this event. I agree to allowing my photo, video or film likeness to be used for legitimate purpose by the Metro Tri Club, the event sponsor(s) and/or assigns.

_____ / _____
Signature | Date

_____ / _____
Signature | Date

_____ / _____
Signature (or Parent or Guardian if under 18) | Date

_____ / _____
Signature (or Parent or Guardian if under 18) | Date

_____ / _____
Signature (or Parent or Guardian if under 18) | Date

_____ / _____
Signature (or Parent or Guardian if under 18) | Date