



**Join us for the 5K Run/Walk for the Children**

**Sunday, April 25, 2021 at 9:00am**

**Burton Village Square**

**Event Fees: \$20 per person with advance registration**

**\$25 per person Race Day \*All paid registrations receive T-shirts**

**Awards: Awards will be presented to 1<sup>st</sup> place in each age group**

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Complete the form below or register online at [greatlakesracetiming.com](http://greatlakesracetiming.com)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Age day of race \_\_\_\_\_ Sex \_\_\_\_\_ T-shirt size (S M L XL) \_\_\_\_\_

Make checks payable to DDC Clinic and mail to DDC Clinic, 14567 Madison Rd., Middlefield, OH 44062. Further information contact DDC Clinic at 440-632-1668 or [Info@ddclclinic.org](mailto:Info@ddclclinic.org)



**RELEASE STATEMENT:**

I know of and acknowledge the risks involved in participation in this athletic event (the "Event"). I understand that serious injury, and even death, is possible in such participation and choose to accept any and all responsibility for my safety and welfare while participating in the Event. With full understanding of the risks involved, I, on behalf of myself, my executors, administrators, and assignees do hereby release and discharge DDC Clinic, the Village of Burton and other sponsors of the Event of all claims and damages, demands and all actions whatsoever in any manner arising out of my participation in the Event. I attest that I am physically fit and sufficiently trained to participate in the Event. I understand the race officials reserve the right, in their sole discretion, to disqualify and remove any entrant from the race whom they deem as a potential hazard to themselves and others without compensation or refund.

I have read the release statement above and agree to the terms.