

Sole to Soul



Come out and race/walk
Sole to Soul. Experience one
of only three races in 2016
along the beautiful shoreline
of Lake Decatur.



Presenting Sponsor
Amanda Giles
877-2831



Group Blessing

Post-race
refreshments

Gift Card Awards:
Top Overall Male
Top Overall Female
Top 2 Finishers in
each age category
(5 year groupings)

Register online:
www.Active.com

Questions:
Ann.Schanuel@hshs.org
217-464-1099



Exclusive Running Store
Sponsor

4th Annual

WDCR 5K Run & Walk for the Talk

Saturday, May 14, 2016

8:00 a.m. Nelson Park

Decatur, IL

\$20 per individual (\$25 after April 24)

Children 10 and under free with parent registration

Race day registration 6:30-7:45 a.m.

Race time: 8 a.m.

Race timed by: CnN Timing

Race packet pickup at Fleet Feet Sports, 1090 W. Wood

on May 13th 4:30-6:00 p.m.



relevant
radio
88.9/96.5FM

Mail registration form and payment to WDCR, 1800 E. Lake Shore Dr., Decatur, IL 62521. Mailed forms due by May 7th.

All checks should be payable to WDCR. \$1 discount for Decatur Running Club Members.

Official Entry Form & Waiver

Please complete for each participant.

Name: _____ Address: _____ City, State: _____ Zip: _____ Email: _____ Birthdate: _____ Male _____ Female _____	CIRCLE EVENT YOU ARE PARTICIPATING IN: <table border="0"> <tr> <td>5K Run</td> <td>5K Walk</td> </tr> <tr> <td colspan="2">Unisex Shirt Size (circle one)</td> </tr> <tr> <td colspan="2">S M L XL XXL</td> </tr> <tr> <td colspan="2">Youth Shirt Size (circle one)</td> </tr> <tr> <td colspan="2">S M L</td> </tr> <tr> <td colspan="2"><i>Participants must register by April 24th to be guaranteed a t-shirt.</i></td> </tr> </table>	5K Run	5K Walk	Unisex Shirt Size (circle one)		S M L XL XXL		Youth Shirt Size (circle one)		S M L		<i>Participants must register by April 24th to be guaranteed a t-shirt.</i>	
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I'm unable to participate but would like to make a donation to WDCR in the amount of: _____

Decatur Catholic Radio is a division of HSHS St. Mary's Hospital, Decatur, of the Hospital Sisters of the Third Order of St. Francis. Gifts and payments to Decatur Catholic Radio are tax deductible as allowed by law.

WAIVER: In consideration of my entry, I for myself, my executors, administrators and assigns, do hereby release and discharge WDCR (Decatur Catholic Radio), The Decatur Park District, City of Decatur and HSHS St. Mary's Hospital and all race sponsors, workers, directors and officers for any injuries suffered by me at this event. I certify that I have trained for a race of this distance and weather conditions, and I am physically fit for the race entered. Signature: _____

(Parent or guardian for consent if entrant is under 18).



HSHS
St. Mary's
Hospital