

Star 6 MEMORIAL RUN



**5K RUN/WALK
10K RUN**

MAY 20, 2012 • NIMBUS FLATS

1901 Hazel Avenue
Rancho Cordova, CA 95670

5K RUN/WALK • 10K RUN

RACE DAY REGISTRATION | 7:30 AM

Pre-race Packet Pickup: Saturday, May 19, 2012
Fleet Feet Fair Oaks • 8128 Madison Avenue
(corner of Madison and Fair Oaks)

RACE TIME | 9:00 AM

5K, 10K & 1 Mile Run/Walk
Walkers, Strollers & Baby Joggers Welcome! Dogs OK.

COURSE | NIMBUS FLATS

One of the fastest and most scenic 5K/10K courses you will run. Starting at Nimbus Flats, our route takes you through the beautiful American River Bike Trail. Start & finish at Nimbus Flats.

ENTRY FEES

\$35 | 5K, 10K & 1 Mile Run/Walk

REGISTER & PAY ONLINE AT
WWW.STAR6.ORG
OR MAIL IN ENTRY FORM & CHECK

\$15 PER YOUTH RUNNER | Youth Team Registration (up to 18 runners)

REGISTER & PAY ONLINE AT **WWW.STAR6.ORG**
OR MAIL IN ENTRY FORM AND CHECK (SEE BACK SIDE FOR DETAILS)

PRESENTING SPONSORS

CrossFit
Forging Elite Fitness

VENUE SPONSOR



MEDIA SPONSOR

KTXL.TV SACRAMENTO



RACE TIMED BY | **SYNERGY RACE TIMING**



Star 6 MEMORIAL RUN



Supporting the spouses, families and "brothers and sisters" of the fallen and injured men and women of law enforcement...

5K RUN/WALK | 10K RUN

SUNDAY, MAY 20, 2012 | NIMBUS FLATS

1901 HAZEL AVE, RANCHO CORDOVA, CA 95670

First Name _____

Last Name _____

Male Female Age _____
(on race day)

Address _____

T-Shirt Size

S M L XL XXL

City _____

State _____

Zip _____

T-shirt guaranteed for all pre-registered runners/walkers during pre-race packet pickup at Fleet Feet Fair Oaks, 8128 Madison Avenue (corner of Madison and Fair Oaks).

Phone _____

Email _____

REGISTRATION FEES

Check the race you are registering for:

5K 10K 1 Mile Run/Walk

Check the amount of money you are enclosing:

- 5K/10K Run **\$35.00**
- 1 Mile Run/Walk **\$35.00**
- Youth Team Registration **\$15.00/per youth runner**

If you are on a team, what is your team name?

Please make checks payable to the **STAR 6 Foundation & mail to:**

STAR 6 Foundation
Attn: Memorial Run
1700 I Street, Suite 100
Sacramento, CA 95811

Team Captain _____

WAIVER: In consideration of your accepting my entry, I, intending to be legally bound, do hereby for myself and my heirs, executors, administrators waive and release any and all rights and claims for damages I may accrue against the persons and organizations affiliated with the race of any and all injuries that may be suffered by me or in route to and from the event. I attest that I am physically fit and sufficiently trained for this competition, my physical condition verified by a licensed M.D., during the last 6 months. As part of the waiver, I acknowledge that I have read and understand the above.

No Refunds—Run is held rain or shine.

Participant Signature (Parent/Guardian if participant is under 18) _____ Date _____



For further information, please contact *Roger Engelsgaard* at (916) 441-4141.
Thank you for supporting Sacramento County Deputy Sheriffs' Association.
1700 I Street Street, Suite #100 • Sacramento, CA 95811 • www.scdsa.org