



Sponsors



THE SALMON RUN

Sunday
September 20, 2009

Small Fry Obstacle Race
8:45 A.M.

Smolts 1km Race
9:00 A.M.

5km Walk / Run
9:30 A.M.

10km Run
9:30 A.M.

at the
**LEAVENWORTH
FISH HATCHERY**
on Icicle Road



U.S. Fish and Wildlife Service
and Okanogan-Wenatchee
National Forest



SALMON



RUN

LEAVENWORTH
WASHINGTON

A SPECIAL EVENT OF THE

Wenatchee River
**SALMON
FESTIVAL**

THE SALMON RUN

All proceeds go to Salmon Fest & Education

Sunday, September 20, 2009

START TIMES:

SMALL FRY OBSTACLE RACE - 8:45 A.M.

SMOLTS 1KM - 9:00 A.M.

5KM WALK/RUN - 9:30 A.M.

10KM RUN - 9:30 A.M.

LOCATION:

LEAVENWORTH FISH HATCHERY

DESCRIPTION

A 10km run and 5km walk and run on pavement with some trail running

REGISTRATION

8:00-8:45 at the Salmon Fest
Leavenworth Fish Hatchery

AGE GROUPS - 5K & 10K

under 15, 15-19, 20-29, 30-39, 40-49, 50-59, 60+

SMALL FRY OBSTACLE RACE

Kids under 6 can race our small fry obstacle course.

SMOLTS RACE

Kids 6-13 - 1km with obstacle course included

ENTRY FEE

\$35 for adults - includes tech t-shirt

\$5 for kids 1km and obstacle - no t-shirt

Family Rate - \$70 max (includes parents and minor children)

**Register by September 1
to guarantee tech t-shirt**

After Sept. 10 - \$40 (shirt if available)

AWARDS

1st Place in each age group and special prizes

INFORMATION CONTACT

Mt. Stuart Physical Therapy
(509) 548-3133

10171 Chumstick Hwy
Leavenworth, WA 98826

Email: claudia@mtstuartpt.com

Websites: mtstuartpt.com or ncwspportsevents.com

SALMON RUN REGISTRATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____

AGE (on Sept. 20, 2009) _____ GENDER (circle one) M F

Circle which event you will be participating in:

Small Fry Obstacle Race Smolts 1km Race 5km Walk 5km Run 10km Run

ENTRY FEE: (check one) **Register by September 1 to guarantee tech t-shirt**

5K / 10K \$35 1km and obstacle (no shirt) \$5 Family \$70 After Sept. 10 \$40 (shirt if available)

T-SHIRT SIZE (circle one) ADULT: small medium large X-large

Make checks payable to:
Mt. Stuart PT

SALMON RUN

ACKNOWLEDGMENT, WAIVER & RELEASE FROM LIABILITY ("AWRL")

ALL PARTICIPANTS MUST READ AND SIGN. PLEASE READ CAREFULLY BEFORE SIGNING THIS ACKNOWLEDGEMENT, WAIVER AND RELEASE FROM LIABILITY.

I acknowledge that the SALMON RUN (the "event") tests a person's physical and mental limits with the potential for death or serious injury. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN THE EVENT. I certify that I am physically fit and have sufficiently trained for participation in the event. I acknowledge that my statements on this AWRL are being accepted and relied on by the event organizers and sponsors in permitting me to participate in the event. In consideration for allowing me to participate in the event, I take the following actions on behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, or anyone else who might claim or sue on my behalf: (i) I WAIVE, RELEASE, AND DISCHARGE the event organizers, volunteers and sponsors and the officers, directors, employees, representatives and agents of any of the above (the "Organizers") from any and all claims, losses, or liabilities for death, personal injury, medical or hospital bills, or damage of any kind, including economic losses, which may in the future arise out of or relate to my participation in or my traveling to and from the event; (ii) I ASSUME ANY AND ALL OTHER RISKS associated with participating in the event and any hazard that may be posed by Organizers, spectators, traffic, pedestrians and animals; and (iii) I AGREE TO INDEMNIFY AND HOLD HARMLESS the Organizers from any and all claims made or liabilities assessed against them as a result of (a) my actions or inactions, (b) the actions, inactions or negligence of others including some or all of the Organizers, (c) the conditions of the areas where the event is being conducted; and/or (d) any other harm caused by an occurrence related to this event:

I HEREBY AFFIRM THAT I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.

PRINT NAME _____ SIGNATURE _____ DATE _____

(Participant)

If Participant is under 18 years of age, the parent /guardian and the participant must sign below.

I HEREBY AFFIRM THAT I AM THE PARENT/GUARDIAN of the above Participant and that I consent to, acknowledge, and approve the above AWRL, individually and on behalf of the minor Participant named above. I agree to indemnify and hold harmless the Organizers for any claims made or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the foregoing AWRL or in the execution of this Consent.

I HEREBY AFFIRM THAT I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.

PRINT NAME _____ SIGNATURE _____ DATE _____

(Parent / Guardian of above Participant)