



Wellspring  
Stampede 2010  
**10K Run/Walk**

A Benefit for Wellspring's Family Based Services

**Sunday, April 25, 2010**

Canyon Lake Park ♦ Rapid City, SD

Registration 8:00 AM - 9:00 AM

**Run Start Time: 9:30**

Name \_\_\_\_\_ Age (on date of race) \_\_\_\_\_ Male  Female

Address \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Pre-race Registration Fee \$25** Free T-shirt with registration (Please check your T-shirt size)

**Day of Race \$30**

Small  Medium  Large  X-Large  XX-Large

Additional T-Shirts = \$25  (Indicate number and size(s)) \_\_\_\_\_

Special Edition Collectors Print \$25  Total Amount enclosed/charged: \_\_\_\_\_

Enclosed is my check made payable to Wellspring Inc.

Please charge to my credit card: MasterCard  Visa

Card Number \_\_\_\_\_ Exp date \_\_\_\_\_

Card Holder's Name \_\_\_\_\_ Signature \_\_\_\_\_

**Awards will be presented after the race to the 1<sup>st</sup> place Male and Female runners in the following categories:**

Youth 12 & under  Teen 13-19  Adult 20-29  Adult 30-39  Adult 40-49

Adult 50-59  Adult 60-69  Adult 70 & over

*Special Categories* (can be used in addition to individual time)

♦ **Fastest Family**  ♦ **Fastest Business**  ♦ **Fastest Military Team**

Family Name \_\_\_\_\_ Business Name \_\_\_\_\_

Must be at least three team members – larger teams will use top three times for score

**Waiver and Release for Wellspring Stampede, April 26, 2010**

I know that running can be a hazardous activity. I assume all risks associated with running including, but not limited to, falls, weather conditions, contact with other participants, the effects of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, I, for myself and anyone entitled to act on my behalf, waive and release Wellspring, Inc., the City of Rapid City, plus all event partners, sponsors, and volunteers, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this race even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. Further I grant permission to all of the foregoing to use any photographs, motion pictures, or other record of this event for any legitimate purpose without compensation to me.

Date \_\_\_\_\_ Signature of participant \_\_\_\_\_

(Parent or guardian signature of participants under 18)

**Please mail or fax to:**

Wellspring ♦ PO Box 1087 ♦ Rapid City, SD 57709

Phone or Fax orders (credit card registration only) ♦ (605) 718-4870 ♦ FAX (605) 718-4878

Email (credit card registration only): stampede@wellspringrc.org