

7:00 a.m. – Registration/Package Pickup
7:45 a.m. – 2 Mile Run/Walk & 5K
Immediately following race – Awards (outside The Old Dairy)

All age groups welcome

**T-shirts guaranteed to those who register by
Wednesday, June 19, 2024**

Fruit, snacks, & water for all run participants

Registered children (12 and under) receive a free ice cream coupon for the Old Dairy on the day of the event

Awards for top male & female finisher for both runs

Proceeds benefit The Samaritan Well, Inc. and St. Jude Children's Hospital



SAMARITAN WELL, INC.
BLIVEN RUN/WALK

Registration: Register at runsignup.com – John Bliven Run *Registration until **6/28/2024***

Completed Form: Mail to: Attn: Amber Clark or Drop off: The Samaritan Well, Inc.
The Samaritan Well, Inc. 1306 Maple Avenue
1306 Maple Avenue Macomb, IL 61455
Macomb, IL 61455

Fee: \$20 Kids (12 and under)
\$25 Kids Registration on Race Day
\$30 Pre-Race Day ***Deadline 6/28/2024 4:00 p.m.***
\$35 Registration on Race Day ***opens online at 6:00 a.m**

Payment: Make checks payable to **The Samaritan Well, Inc.**

Run Day Registration and Check-In: The Old Dairy, 210 South Lafayette Street, Macomb, IL 61455

Mail Registration Form and Entry Fee (Keep Top Portion)

Name: _____ **Phone:** _____ **Email:** _____

Address: _____

Age: _____

Gender: Male or Female (circle one)

Event (mark one):

T-Shirt Size (circle one):

____ 2 Mile Run/Walk

Youth M L

____ 5k Run/Walk

Adult XS S M L XL XXL (+\$2)

Release & Waiver: In consideration of my Participation, I hereby for myself, my heirs, Administrators, and assignees waive, release, and forever discharge any and all involved and their respective agents any claims which may hereafter accrue to me against the directors of the run, the town of Macomb, and all sponsors and workers for any and all claims, demands, accidents, or injuries incurred by reason of my participation for the above said event and while traveling to and from said event. I certify that my participation in this event is free and voluntary. Further, I hereby grant full permission to any and all of the foregoing to use my photograph or any other record of the event for legitimate purposes. I have read and understand the forgoing Release.

Signature (Guardian if under 18): _____ **Date:** _____