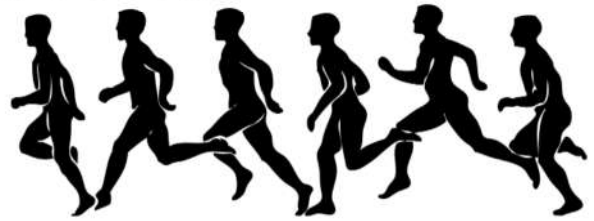


45th Annual Zwolle Tamale Fiesta

1 MILE & 5-K RACE FOR THE TAMALES

Saturday, October 9th, 2021



LOCATION:

Registration will be in front of the Festival

DISTANCE:

3.1 Miles – 5-K Run/Walk

1 Mile Run (Ages 1-13)

TIME:

7:00 A.M. - Check In and Late Registration

7:30 A.M. – 1 Mile Fun Run

8:00 A.M. – 5-K Run/Walk

ENTRY FEE:

1 Mile Run & 5-K - \$20

MISCELLANEOUS:

On course timing: Drinks provided at finish line; run entirely on pavement

Door Prizes after Race

Please return this section only

ENTRY FORM: Zwolle Tamale Fiesta 5-K Race & 1 Mile Fun Run. Send registration form for each runner and make check payable to: Zwolle Tamale Race, P.O. Box 71486

AGE GROUPS: (Male & Female)

5-K Run/Walk		1 Mile Run
1-14	30-39	1-8
15-19	40-49	9-13
20-29	50-59	3 Deep
	60-Over	All Non-Winners will receive a participation trophy

AWARDS

5-K Race/Walk/Fun Run: T-shirts to the 1st seventy-five (75) paid customers; others will be mailed later. First, second and third place trophies will be awarded to the over-all 5K male and female winners. Trophies will also be awarded to the top 2 male and female participants in each age group. Only over-all winners will be awarded in the walk. No duplicate winners. Trophies to be presented

Following completion of Race 876, Zwolle, LA

NAME _____ Age (As of Oct 9, 2021) _____

ADDRESS _____ City _____ State _____ Zip Code _____

Phone _____ Male () Female () Circle Size: Youth (M) (L) Adult Size (S) (M) (L) (XL)

Check Event: 5-K Run/Walk _____ 1 Mile Fun Run _____

I, myself, my executors, administrators, or assigns, in consideration of the foregoing, do hereby release and discharge the **Zwolle Tamale Fiesta, Town of Zwolle, sponsors, and officials of the Zwolle Tamale Race** from all claims of damages, actions, and cause of actions whatsoever, whether for personal injury, death or property damage, in any manner arising or growing out of my participation in said run whether or not resulting, in whole or in part, by fault or negligence on the part of the **Festival, sponsors, the Town of Zwolle**, or any of their respective agents or employees. I attest and verify that I am physically fit to compete and complete the race I have entered. **NO REFUNDS.**

SIGNATURE _____ (If under 18 years of age signature of parent or guardian)

For Information Call: Rich Remedies: (318) 471-0840

