

Run for the **STINKIN' ROSES**

10K RACE / 5K FUN RUN – WALK

🌷 Awards 3 deep by group, Raffles & Goodie Bags 🌷

SATURDAY, JULY 12TH, 2008

GILROY, CALIFORNIA



Presented by

South Valley Running Club

www.svrchome.org



Portion of Proceeds fund

Friends of San Martin Animal Shelter

(FOSMAS)



**FREE SMOOTHIES
TO ALL RUNNERS**

- Location** : Solorsano Middle School, 7121 Grenache Way, Gilroy
Time : Race day registration begins at 7:00 a.m.
 Races start at 8:00 a.m.
Entry Fee : \$25 Pre Register by June 26th, \$20 if under 18 or 60+, with shirt
 \$30 After June 26th and race day, no guarantee of shirt
Course : **Scenic course** along Santa Teresa, back on the bike levee.

-----Cut Here and Return Bottom Portion-----

Online registration at www.active.com or mail completed form and check payable to South Valley Running Club to: South Valley Running Club, P.O. Box 323, San Martin, CA 95046-0323. For more race information call Allan Abrams at (408) 782-0014 or email info@svrchome.org

Name _____		Check Race Entered & Gender	
Address _____		<input type="checkbox"/> 10k Run <input type="checkbox"/> 5k Walk/Run	
City _____	State _____	Age Group	<input type="checkbox"/> Male <input type="checkbox"/> Female
Zip _____		<input type="checkbox"/> <13 <input type="checkbox"/> 13-18 <input type="checkbox"/> 19-29	
Email _____		<input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59	
T shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL		<input type="checkbox"/> 60-69 <input type="checkbox"/> 70 & Over	

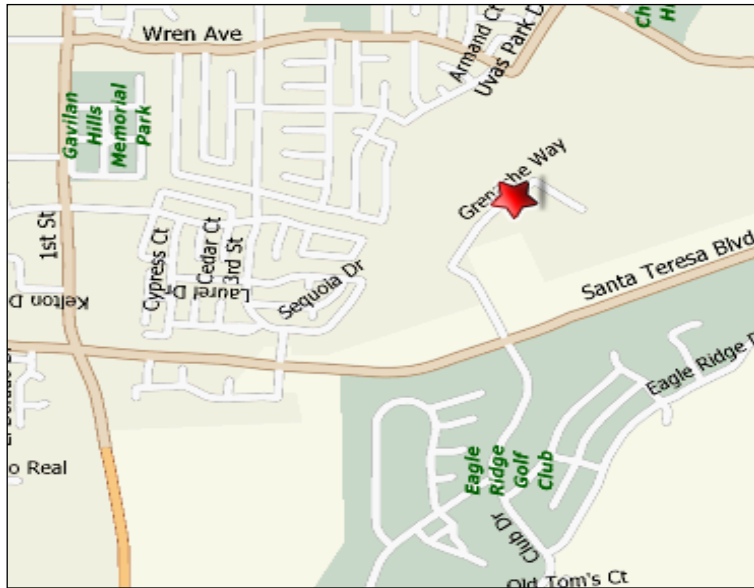
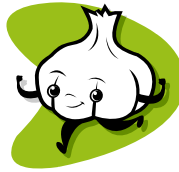
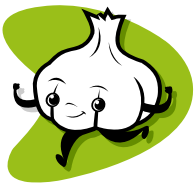
EMERGENCY CONTACT (Name and Phone): _____

In consideration of the acceptance of my entry, I do hereby, for myself, my heirs, executors, and administrators, waive, release and forever discharge any and all rights and claims for which I may, or hereafter may accrue against the South Valley Running Club, the race sponsors, or any other coordination groups, agencies or persons as a result of this race even though liability may arise out of negligence or carelessness on the part of the person or entities mentioned above. I certify that I am physically fit and sufficiently trained for this competition and that my physical condition for participation in this event has been verified by a licensed medical doctor during the past six months.

Signature

Date

Parent/Guardian Signature If Under 18



South Valley Running Club
P.O. Box 323
San Martin, CA 95046-0323