



LOGAN VIEW RAIDER RUN
Logan View Education Foundation
50k, MARATHON, ½ MARATHON & 5k
August 18th 2018



Race Information

50k, Marathon, ½ Marathon and 5k Run/Walk will start near the Logan View football stadium and end in the West parking lot. **50k & Marathon** will start at 5:00 pm and the **½ Marathon and 5k Run/Walk** will start at 6:30 pm. Each 50k, Marathon and ½ Marathon participant receives a dri-fit t-shirt and a pork sandwich dinner. Each 5k Run/Walk participant receives a 50/50 blend t-shirt and a pork sandwich dinner. Aid stations will be provided.

Packet pick-up: 9:00 am until race time on Saturday, August 18th at the Logan View concession stand next to the football stadium. A pork sandwich dinner will be available starting at 6:00 pm on Saturday.

Name: _____ **Phone:** _____
Mailing Address: _____ **E-mail:** _____
City: _____ **State:** _____ **Zip:** _____ **Gender:** M F

Race Fees (t-shirt guaranteed only with registrations received by 8/1/18)

Race	Earlybird Postmarked By 2/18/18	Postmarked 2/19/18 to 6/18/18	Postmarked 6/19/18 to 8/17/18	Day of Race
50k	\$70	\$80	\$90	\$95
Marathon	\$60	\$70	\$80	\$85
½ Marathon	\$40	\$50	\$60	\$65
5k Run/Walk	\$25	\$30	\$35	\$40

Birthday: ____/____/____

Age on 8/18/2018: _____

T-Shirt Size: Men's S M L XL XXL
 Women's S M L XL

Entry Fee: _____ *extra \$2 fee for XXL*
Add'l Pork Sandwich Meals: _____ (\$8 for adults, \$4 for 12 & under, 3 years & under eat free)
Donations: _____ All proceeds go to Logan View Education Foundation
Total: _____ *Make checks payable to LV Raider Run*
Please indicate the total number of meals (yours plus additional purchased above): _____

Race Waiver I, the undersigned, represent that I am medically fit and have properly trained to participate in this event. I hereby for myself, my heirs and executors, release any and all claims or right to make claims against Logan View Public Schools, Logan View Education Foundation, Logan View Public Schools Administration and employees, any and all race directors, sponsors, organizers, employees, and volunteers associated in any way with The Logan View Raider Run, the 50k, Marathon, Half Marathon, 5k and Kid's Fun Run. I recognize and assume the risks inherent in running a road race, including but not limited to the risk of injury associated with strenuous physical exercise, contact with other participants, falls, the risk of running on open roads and near traffic and trains, and the risk of uncertain weather including heat and humidity. This release extends to all claims of every kind of nature whatsoever, foreseen or unforeseen known and unknown. I grant permission for any and all foregoing to use any photographs, video tapes, recordings or any other record of this event for any purpose whatsoever.

Signed: _____ **Date:** _____
 (Signature of parent/guardian if participant is under 18 years of age)

Mail forms to: LV Raider Run, Attn. Race Director, P.O. Box 315, Hooper, NE 68031
 Race Questions: e-mail lvraiderrun@midlands.net phone 402-654-2331 or 402-620-8565
 Race web site: www.loganviewmarathon.com online registration at www.raceentry.com