

SHUCK & SHARE 5K RUN - Sunday, October 7, 2018



Race begins at 8:00 a.m.

Huff n Puff Trail - 3600 Shelton Springs Rd.



Packet pickup is Friday, October 5th from 8:00 a.m. - 5:00 p.m. & Saturday, October 6th from 9:00 a.m. to noon at Mason County PUD 3, 2621 E. Johns Prairie Road
OR
on race day beginning at 6:30 a.m. at the registration tent.

The Shuck & Share 5K will start at the Huff n Puff across from the Shelton High School. It is a nice flat 5K loop.

All profits will go to support Project Share, an assistance program helping hundreds of low-income families with their electric bills.

For details and updated information, please visit www.pud3.org/run

Please share this event with friends and family and ask them to support your efforts in making a difference for low-income families in our community. Like us on Facebook and sponsor a participant - visit our website for more information!



REGISTRATION FORM

Each runner/walker must submit a separate form with entry fees. Please complete the registration form, *sign the waiver*, and mail to: **Mason County PUD 3, Attn: Shuck & Share Run, PO Box 2148, Shelton, WA 98584**

RACE FEE: \$25 through October 6th (\$30 on race day), 14 & under by donation (Use separate form).

PAYMENT: check (*make checks payable to "United Way of Mason County/Project Share"*)
*To pay by credit card, must register and pay at www.runsignup.com "shuck & share 5K 2018."

NAME: _____ AGE (as of race day): _____ Male: Female:

PHONE: _____ EMAIL: _____ DATE OF BIRTH: _____

ADDRESS: _____ City, State, Zip: _____

SOCK SIZE (while supplies last): S women 5-8 men 4-6.5 M women 8.5-10.5 men 7-9.5 L women 11-13 men 10-12 XL women 13+ men 12.5+

I would like to support the PROJECT SHARE fund with an additional donation of: \$5 \$10 \$20 \$50 \$100 Other: _____

WAIVER AND RELEASE: I know that running a race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to, falls; contact with other participants; the effects of weather, including heat or humidity; the condition of the trail; all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Mason County PUD 3, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. In consideration of your accepting this entry, I, the undersigned, intending to be legally bound hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have, or that might accrue against Mason County PUD 3, Mason County, Shelton School District, the City of Shelton, USATE, the Shelton Harriers and their agencies, officers, and employees, for any and all injuries suffered by me in said event.

SIGNATURE (required): _____ DATE: _____

PARENT'S SIGNATURE (if participant is under 18 years of age): _____

EMERGENCY CONTACT NAME: _____ PHONE: _____