



HSHS
St. Francis
Hospital



Fit for Life Quadruple Bypass

Saturday, June 27

Milnot Beach – Litchfield Lake Lou Yaeger



TIME: Registration: 4K: 7:00 – 7:45 am
Races begin at 8:00 am

REGISTRATION: \$30; \$35 same day registration
Cash, Check or Online via Active.com

AWARDS: Overall male and female winner for each individual race
Ribbons to top three male and female for each individual race in each of the following age groups:
9 & under, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70 & up

RESULTS: Check website for results www.mmmultisport.com

CANCELLATIONS: The Bypass goes on rain or shine. No refunds will be given. Swag and awards will not be mailed.
Other race information available at www.mmmultisport.com



2020 Race Series: Only the 4K counts towards M&M Multisport 2020 Race Series

To guarantee Swag Register by 06/14

Please PRINT clearly:

Sex: M [] F [] Birthdate: _____
MM/DD/YYYY

Name: _____

Address: _____ Age on race day: _____ Size: _____

City/St/Zip: _____ Phone: _____

Sizes that could be Available:

- [] Youth Sm [] Youth Med [] Youth Lg
[] Adult XS [] Adult Sm [] Adult Med
[] Adult Lg [] Adult XL [] Adult XXL

Email address: _____

WAIVER OF LIABILITY: In consideration for accepting this entry, I, the undersigned, being of legal age, and intending to be legally bound, hereby, for myself, my heirs, executors, administrators and assigns, hereby waive and release any claim and rights I may have for any injuries or damage I may sustain as a result of my participating in the Fit for Life Series. This release is specifically meant to release all said claims as they relate to the sponsors of the event, their representatives and agents, including, but not by way of limitation, M&M Multisport Club. I specifically state that I am physically fit and am able to compete in this event. I further state that in the event it becomes necessary to incur any expenses or become obligated to pay any attorney fees or costs to enforce this agreement, that the undersigned shall reimburse the sponsors heretofore named for all expenses, including, but not by way of limitation, attorney fees and costs incurred. Further, I grant full permission for the free use of my name and/or any photographs, videotapes, or any other record of this event for legitimate purposes. I have carefully read this release and fully understand its contents. I am aware that this is a release of liability and a legal and binding contract, and I am signing this agreement free of my own will.

Signature (parent or guardian if under the age of 18) _____ Date _____ Printed Name _____

Return form & check payable to M&M Multisport Club, memo Fit for Life, PO Box 322, Litchfield, IL 62056

