



# 6TH ANNUAL KELLERMANN'S BATWA CHALLENGE! 5 & 10K RUN AND 5K WALK + FREE KID'S RUN!

*A Gold Country Grand Prix Event*

**The Cause: The Kellermann Foundation's work with the Batwa Pygmy Community in Uganda through the Bwindi Community Hospital and the Batwa Development Program. Dr. Kellermann will present a pre-race introduction of the Kellermann Foundation's work. Visit their website for more information:**

<http://www.kellermannfoundation.org>

## Saturday August 26, 2017

**Time:** 7:00-7:45 am registration; 8:00am start time  
**Location:** Pioneer Park, 423 Nimrod St, Nevada City, CA 95959  
**Cost:** \$25 PER PERSON ADULTS 15 YRS AND OLDER  
\$20 PER PERSON CHILDREN 14 YRS AND YOUNGER; \$15 WALK  
\$20 PER PERSON NU AND BR STUDENTS

**DOGS NOT PERMITTED ON COURSE; STROLLERS ALLOWED ON 5K WALK ONLY**

For additional information on sponsoring and supporting this race, call Jean Creasey at 530-798-8858 or 530-265-5815  
Visit our website: [www.batwachallenge.com](http://www.batwachallenge.com)

**PLEASE SEND ENTRY FORM AND CHECK PAYABLE TO: THE KELLERMANN FOUNDATION AND MAIL TO:  
BATWA CHALLENGE, C/O JEAN CREASEY, D.D.S., 216 S. PINE ST, NEVADA CITY, CA 95959**

Last Name: _____	First Name: _____	Race Day Age _____	DOB _____							
Address: _____		City: _____	Sate _____ Zip _____							
E-mail address: _____		Phone _____								
Circle Race Day Age Division:	10 & under	11-14	15-18	19-29	30-39	40-49	50-59	60-69	70-79	80 & up
<b>Circle Gender:</b> Male Female	Circle Event:		5K Run	10K Run	5K Walk					
<b>Entry includes a Batwa Challenge Running Hat or Tote Bag</b>										

Disclaimer: I know that participating in and/or volunteering to work at the Kellermann's Batwa Challenge is a potentially hazardous activity. I should not enter and run, walk and/or volunteer 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, walk and/or volunteer. I also agree that I may be examined and treated if necessary during the course of a race by qualified race personnel in the event medical problems arise. The race officials or the qualified personnel have the right to disqualify me and remove me from the race, if in their opinion, I may be suffering from a life threatening condition. I assume all risks associated with walking/running in and volunteering for races including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for participation in races and/or my volunteering, I, for myself and anyone entitled to act on my behalf, waive and release the Kellermann Foundation, the 49er Rotary Club, the City of Nevada City, and all above mentioned officers and agents, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in events even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I also approve the use of my and/or dependent's picture taken before, during or after the races for promotional use without further compensation.

Signature of Parent/Guardian (under 18) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_