



First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Race Day: \_\_\_\_\_ Sex: M / F

T-Shirt Size: Please check options: **LADIES** or **MENS**   **S** **M** **L** **XL** **XXL**

Entry Fee (Please check box):

**Prior to September 10:** \$25 [  ]

**September 10 through Race Day:** \$35 [  ]

**UW-Superior Students:** \$20 [  ]

**Military Veterans:** \$20 [  ]

**PK-12 Students:** \$20 [  ]

Checks payable to: Douglas County Treasurer

Please remit this form in person or by mail along with payment to the Douglas County Treasurer at:

1313 Belknap Street, Rm 102  
Superior, WI 54880

\*Only Check will be accepted by mail, do not mail cash. Cash or check will be accepted in person. Credit Card Payments can only be made through the link provided at [www.uwsuper.edu/Heroes5K](http://www.uwsuper.edu/Heroes5K)\*

To ensure delivery on time we recommend all mailed entries to be postmarked no later than September 3, 2018 to ensure a race shirt, and no later than September 14, 2018 to ensure race entry without guaranteed shirt. We will not be responsible for any entries not received before race day.

Waiver: I am entering this race at my own risk and assume all risk and responsibility for any and all injuries I may incur as a direct or indirect result of my participating in this event. I, for myself, heirs, and executors, also agree not to hold any and all participating sponsors and supporters and the directors, employees, and agents of such parties responsible for any claims. I verify that I have full knowledge of the risks involved in this event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian if under 18: \_\_\_\_\_

**For more information, please visit: [www.uwsuper.edu/Heroes5K](http://www.uwsuper.edu/Heroes5K)**