

37th Annual FREEZE YER GIZZARD BLIZZARD RUN™

2017 Registration Form

Please print clearly

Name*: _____

Address*: _____

City*: _____

State*: _____ Zip/Postal Code*: _____

Email*: _____

Phone*: _____ Cell Phone: _____

Gender*: Male Female Birthdate*: _____



RACE DAY IS SATURDAY, JANUARY 21, 2017

Before Dec. 31, 2016 10K Run—\$40 5K Run—\$40

After Dec. 31, 2016 10K Run—\$45 5K Run—\$45

Check here if you plan to run both races. Pay one fee plus \$15.

Credit Card # _____ Card Expiration Date: _____

Visa MasterCard Discover

Race shirts are back by popular demand. Please select your size:

Youth: __x-small __small __medium __large

Adult: __x-small __small __medium __large __x-large __xx-large

I am entering this event at my own risk and assume all risk and responsibility for 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. I am aware that extreme and/or severe weather conditions will exist at the time of this event and that I am physically fit and sufficiently trained to participate in it. **Race course personnel will be present on race course until noon.**

Signature: _____ Date: _____

Parent/guardian's signature if under 18 years of age: _____

Make checks payable to:

The Chamber of Commerce
(U.S. Funds Only)
Registrations are nonrefundable

Mail to:

301 Second Avenue
International Falls, MN
56649

Questions:

800-325-5766 or 218-283-9400

chamberadmin@intlfalls.org
www.ifallschamber.com

- Register as a group of 15 or more by December 31, 2015 and receive a *20% discount.
- Register three or more immediate family members by December 31, 2016 and receive a *15% discount.

Average Low Temperature in January—8°

Average High Temperature in January 14°

Record Low Temperature in January —55° (1909)

Chamber Section:

Runner's Bib Number: _____

Payment Date: _____ **Form of Payment:** _____ **Received by:** _____