

The 45th Annual Great Sedro-Woolley Footrace

www.sedrowoolleyfootrace.com

5.17 Mile Race and 2 Mile Fun Run/Walk

Monday July 4th, 2022 9:30 AM

In support of

Sedro Woolley Rotary Scholarships

Accurately measured, well policed course begins and ends over the route of the 4th of July Loggerodeo Parade. The middle section of the race is run along the Skagit River. The 2 mile run goes to the one-mile turnaround and returns to the start/finish line.

Register online at: www.sedrowoolleyfootrace.com

Registration Forms also Available at: S-W Chamber, www.loggerodeo.org

Race Tag Pickup: July 3rd 4:00-6:00 Or July 4 7:30AM TO 9:15AM

@ Sedro-Woolley High School Gym

Age Categories: 10 & Under 11-13 14-16 17-19 20-29 30-39 40-49 50-59 60-69 70+
All finishers receive a "Finisher Ribbon".

Parking is available on the North side of the high school athletic field. Please do not park in the gym parking lot.
Restrooms available at the S-W High School gym lobby until 11AM.

Fees: Payable to: "S-W Race":

14 & Under & 70+ (must register & have race #):	No Shirt	Free
Pre-register (by July 1):	Order Shirt (Circle Size Below)	\$25
Pre-register (by July 1):	No Shirt	\$20
Day of Race Registration:	No Shirt	\$25
Shirt Only Price (day of race - limited supply):		\$10

Additional information: Kyle Rutherford at (360) 856-4465 or Brock Stiles at (360) 855-0131



The Great Sedro-Woolley Footrace Registration Form

Must be received by Friday, July 1 for pre-registration

Write check to S-W Race and mail to: S-W Race, PO BOX 704. Sedro-Woolley, WA 98284

Name: _____ Age on July 4th: _____ ___Male ___Female

Mailing Address: _____ Phone: _____

City, St. Zip: _____ Email: _____

CIRCLE EVENT: 5.17 Mile 2 Mile SHIRT: No Shirt Adult SM MED LG X-LG XXL Child: MED

Read and Sign: In consideration of the acceptance of my entry, I for myself, heirs, executors and anyone entitled to act on my behalf, waive and release Sedro-Woolley Loggerodeo, City of Sedro-Woolley, Sedro-Woolley School District, Sedro-Woolley Rotary, their members, employees, volunteers, and all sponsors or anyone else associated with this event from all claims or liabilities of any kind arising from my participation in this event. I understand the fees are non-refundable and that insurance is not provided for this event.

- Parents must sign if participant is under 18 years, giving permission for event officials to authorize necessary emergency medical treatment.

I have read the above statement, understand it and verify by my signature my full acceptance of the terms within.

Signature of Participant: _____ Date: _____

Parent/Guardian Signature for participants under age 18: _____

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