

2023 MULE NIGHT 5K

September 22, 2023

Awards

5K Male & Female
 Top Overall Winners and
 Top 3 Winners From
 Each Age and Gender
 Division

Everyone who pre-registers
 will receive a T - Shirt



Annual 5k Run

By your participation, you are supporting our local high school cross country team. Their funding is raised solely through 100 percent of contributions. We thank you for your support and we know through our combined efforts we can help them achieve their goals.

REGISTRATION: \$25.00

Pre-Registration: Available Online at <https://runsignup.com/Race/AL/Winfield/MULENIGHT5K> beginning 6/23/23.
 Cut off will be 9/15/23 at Midnight
 Pre-Registered runners will be able to pick-up their packet starting at 10:30pm at City Hall parking lot on 9/22/23
 Must be registered by 11:30pm on 9/22/23

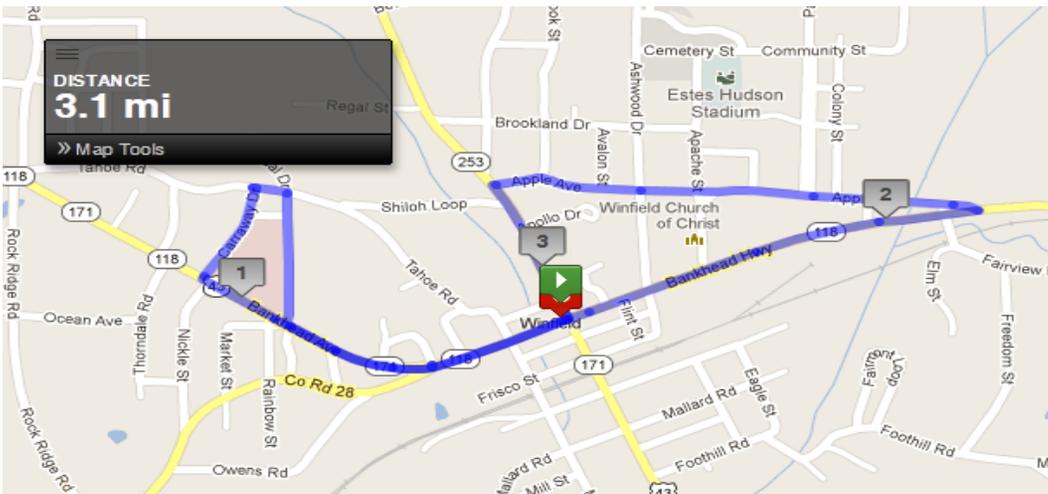
If your are not pre-registered you will not receive a packet and will not be guaranteed a chip timer.

Route Course: See Map Below

Location: Winfield City Hall
Time: 12:00 Midnight

Contact: 205.412.7805 Cell Phone
Mail Form To: Billy Stovall
 Winfield Middle School
 481 Apple Ave
 Winfield , Al. 35594

Make checks Payable to: WCHS



Proceed Recipients: WCHS Cross Country Team

Entry Form



5K Run Fun Run/Walk

Name: _____

Gender: Male Female **Age:** _____

T-Shirts Size (Indicate Size)

Adult Small Medium
 Large X-large



Address: _____

State: _____ **Zip:** _____ **Telephone:** _____

Waiver: I should not enter a run/walk unless I am medically able and properly trained. I know that running/walking a road race is potentially hazardous activity. I also know that although police protection will be provided there may be traffic on the course route. I assume the risk of running in potential traffic. I also assume any and all other risks associated in running/walking this event, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, and the conditions of the road, all such risks being known and appreciated by me knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators and anyone else who might claim on my behalf, covenant not to sue and waive, release, discharge and will hold harmless the Northwest Medical Center, Northwest Wellness Center, volunteers, and any and all sponsors including their agents, employees, assigns, or anyone acting for or on their behalf, for any and all claims or liability for death, personal injury or property damage of any kind or nature whatsoever arising out of, or in the course of, my participation in this event. This release and waiver extends to all claims of every kind or nature whatsoever. The undersigned further grants full permission to allow my name and/or picture to be used in any document, newspaper, broadcast, telecast, or other account of this event without limitation and without compensation to me.

Applications for minors will only be accepted with a parent's signature.

Applicant Signature: _____

Parent/Guardian Signature: _____

Applicant Printed Name: _____

Parent or Guardian must co-sign if applicant is under 18 years of age