

**“Kickin’ Up Dust on the Chisholm Trail” WESTERN DAYS STAMPEDE RUN 2017
37th ANNUAL ELEMENTARY SCHOOL RACES**

Date & Place: Saturday, September 9, 2017 at the Mustang High School stadium enter through North entrance

Event: Elementary School Races 1-Mile Run – Arrive no later than 7:45 am for pre-race instructions.

Divisions and Elementary 1- Mile Run Approximate Start Times: Parade Time (10 am)

1st Grade Boys & Girls 8:00 AM 2nd Grade Boys & Girls 8:20 AM
3rd Grade Boys & Girls 8:40 AM 4th Grade Boys & Girls 9:00 AM

Awards: Custom Medal for 1st through 10th place boy and girl in each grade.
Finisher Certificate for Free Ice Cream courtesy of Mustang’s Sonic

Registration: Cost is \$15.00 per child. This is a children’s race only. Adults will need to sign up for the 5k race.
No refunds or rain date.

ONLINE REGISTRATION - no extra fee – <http://www.mustangpacesetters.org/westerndays.html>
This is the best way to make certain your child’s entry is received and processed in time for the race.
This also ensures that your child receives this year’s t-shirt!

Paper Registrations - Return only the bottom part of the form with a check or exact change for the \$15.00 registration to your P.E. teacher by Wednesday, August 30th.

NO ENTRIES WILL BE ACCEPTED AT SCHOOL AFTER WEDNESDAY, AUGUST 30th.

Late entries will be accepted at the Chili Cook-Off on Fri, Sept 8th from 6-8 pm for \$15 OR
Race Day at Mustang HS Stadium from 6:45-7:30 a.m. for \$15.00.

******T-shirts are not guaranteed for late or race day entries.******

For the safety and security of the children, parents and other non-participants are NOT allowed in warm-up area or on the course. Supervision is provided in the warm-up area and on the course.

Race Packet: Race number and t-shirt will be handed out to Mustang schools by PE teachers prior to race day.

Alternate pick-up: Friday, September 9th from 6 - 8 p.m. during Western Days Chili Cook-Off at Mustang Town Center **OR** Saturday, September 9th 6:45 a.m. to 7:30 a.m. at Mustang HS Stadium prior to race.

Course: Generally flat (Run on School Campus and track) MHS Cross Country Runners will guide.

Results will be posted at the track following the conclusion of the races and online.

Photos will be available at <http://www.mustang-photo.com/event/stampede>

All proceeds benefit Mustang Pacesetters MHS Cross Country Booster Club.

For more information, contact Vickie Bailey at 405-806-0786 or visit the website at www.mustangpacesetters.org.

Elementary School Run September 9, 2017 – Release & Entry Form – Use Separate Form for Each Participant
NO ENTRIES WILL BE ACCEPTED AT SCHOOL AFTER WEDNESDAY, AUGUST 30th

Please print clearly:

Runner’s Name: _____ **CIRCLE ONE: MALE or FEMALE**

Address: _____ **GRADE:** _____

School Name: _____ **Classroom Teacher:** _____

Parent’s Name: _____ **Parent’s Emergency Phone:** _____

Circle T-Shirt Size: Youth Small(6-8)** Youth Med(10-12) Youth Large(14-16) Adult Small Adult Med Adult Large

**Parents and other non-participants are NOT allowed in warm-up area or on course.
Supervision is provided in the warm-up area and on the course. No refunds or rain date.**

**MAKE CHECKS PAYABLE TO: MUSTANG PACESETTERS for \$15.00 (A \$20 returned check fee will be assessed.)
PLEASE INCLUDE: RUNNER’S NAME, GRADE, & SCHOOL ON CHECK to ensure proper credit.**

RELEASE: In consideration of the foregoing, I, for myself, my heirs, executors, administrators, personal representatives, successors and assigns, waive and release any and all rights, claims and courses of action I have or may have against The Western Days Stampede, Mustang Public Schools, the Mustang Pacesetters Boosters and its administrators, their agents, employees, officers, directors, successors and assigns, the Mustang Chamber of Commerce, and any and all sponsors, their representatives and successors, that may arise as a result of my participation in The Western Days Stampede and any pre- and post-event activities. I attest and verify that I am physically fit and have sufficiently trained for the completion of this event and my physical condition has been verified by a licensed medical doctor. Furthermore, I hereby grant full permission to any and all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose including commercial advertising.

Parent/Guardian Signature _____ Date _____

**Limited Quantity

Office Use Only: Payment type: _____

Bib # _____