

**“Bustin’ at the Buckle” - 43rd ANNUAL WESTERN DAYS STAMPEDE RUN
2023 ELEMENTARY SCHOOL RACES - 1 MILE FUN RUN**

Date & Place: Sat, Sep 9th at Mustang High School Stadium. Park and enter at the NORTH entrance.

Race Times: Race Times are approximate. Be sure children arrive 15 minutes prior to their race time.
8:00 a.m. - 1st Grade | 8:20 a.m. - 2nd Grade | 8:40 a.m. - 3rd Grade | 9:00 a.m. - 4th Grade

Awards: Top 10 Boys & Girls Medal - All Finishers receive Free Ice Cream courtesy of Mustang’s Sonic

Registration: PRE-REGISTRATION is \$15.00 per child & includes a shirt. Adults are not allowed on the course. Contact us if your child needs special accommodations. No refunds or rain date.

ONLINE REGISTRATION – <http://www.mustangpacesetters.org/westerndays.html>

This is the best way to ensure your child’s entry is received and processed in time for the race.

PAPER REGISTRATIONS - Return ONLY the BOTTOM PART of this form with a CHECK made out to MUSTANG PACESETTERS or send EXACT CHANGE for the \$15.00 registration to your child’s P.E. Teacher by FRI, AUG 25th.

NO ENTRIES WILL BE ACCEPTED AT SCHOOL AFTER FRIDAY, AUGUST 25th.

Late entries will be accepted during the Chili Cook-Off in front of Mustang Town Center on Fri, Sep 8th from 6-8 pm for \$20 OR Race Day Sat, Sep 9th at Mustang HS Stadium North entrance from 7-7:30 a.m. for \$20.00.

******T-SHIRTS NOT GUARANTEED FOR LATE OR RACE DAY ENTRIES.******

For the safety and security of the children, parents and non-participants are NOT allowed in the 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 at Mustang schools prior to race day.

Alternate Pick-up: Fri, Sep 8th from 6-8 p.m. at the Western Days Chili Cook-Off in front of Mustang Town Center
OR Prior to the races on Sat, Sep 9th 6:30-7:30 a.m. at Mustang HS Stadium.

Course: Generally flat (Run on CC practice field, 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.

Results and Photos will be available at <http://www.mustangpacesetters.org/westerndays.html>.

All proceeds benefit Mustang Pacesetters MHS Cross Country Booster Club.

For more information, contact Vickie Bailey at 405-476-0503 or visit the website at www.mustangpacesetters.org.

Elementary School Mile September 9, 2023 - Release & Entry Form –Use Separate Form for Each Participant

NO ENTRIES ACCEPTED AT SCHOOLS AFTER FRIDAY, AUGUST 25th

MAKE CHECKS PAYABLE TO: MUSTANG PACESETTERS - \$15.00 for Early Registration OR \$20.00 for Late Registration (A \$20 returned check fee will be assessed.)

INCLUDE ON CHECK: RUNNER’S NAME, TEACHER’S NAME, & SCHOOL to ensure proper credit.

Print clearly:

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

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

School: _____ **Homeroom Teacher:** _____

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

Parent’s E-mail: _____ **for updates/registration questions**

**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.**

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** _____

*Size may be substituted based on availability. **LIMITED QUANTITIES

Office Use Only: Payment type: _____

Bib # _____