WI-IL XC BORDER WAR

DATE: Saturday, November 14th **SITE:** University of Wisconsin-Parkside, Somers, WI **Time/Distance:** 10:30am - 3 Kilometer (12 & under) 11:00am - 5 Kilometer (High School Girls) 11:40am - 5 Kilometer (High School Boys) 12:20pm - 5 kilometer (Open & Masters)

COURSES: The UW-Parkside course is the site many major events every fall. The Foot Locker Cross Country Midwest Regional will be held on the UWP XC course on November 28th

TEAM COMPETITION: The top five (5) individual finishers from Illinois and Wisconsin in the High School Boys & Girls races constitute each state's team. The scoring system is based on the total points of these 5 finishers from each state.

STATE SINGLETS: State singlets will be given to all entrants registered on or before Monday, November 9th. Late registrants will receive singlets will the supply lasts.

AWARDS: Medals will be presented to the top five M&F WI & IL finishers in the high school races. Medals will be given to the top five M&F in the 12 &U 3K. Medals go to the top three M&F in the Open (Under 40) & Master's (40+) divisions of the Open Race.

ENTRY FEE: \$15.00 (on or before November 1st) \$20.00 (on or before November 9th) \$25.00 (Late and race day) You may register online at: www.wisconsinrunner.com. (Online registration powered by Active.com) Race day packet pickup and registration opens at 9:00am.

TIMING: Timing will be provided by Wisconsin Runner Timing Systems.

PARKING: Please Park in the UW-Parkside Communication Arts lots. **DO NOT PARK** in Petrifying Springs lots – you will be

ticketed!

FURTHER INFO: Go to www.wisconsinrunner.com

All race procedures go directly to help fund the UW-Parkside Cross Country team and the UWP XC course.

WAIVER: In consideration of the acceptance of my entry in WI-IL XC Border War on Saturday November 14, 2015, I release the University of Wisconsin-Parkside and other presenting or supporting sponsors and any other groups or individuals whom are associated with this race in any manner, from any liability or claims for injury, illness or loss of life, that I sustain from participation in this event. I understand that this release applies to personal representatives, my heirs, assigns and me. I represent that I have sufficiently trained to participate in this race, that a licensed medical doctor has verified my physical condition and that I recognized that risks of injury accompany such participation. I acknowledge that the persons in permitting me to participate are relying upon this release. I also attest that I am at least eighteen years old and if not, by legal guardian have signed this waiver as well as myself. Furthermore, I grant full permission to any or al foregoing to use photographs, videotapes, motion pictures, recordings or any other record of this race for any legitimate purpose.

Last Name		First Name		Middle Initial			_		
Address		City	State	ZIP			_		
()									
Telephone		Email singlet size (please circle):				_			
Birthday	Age Race day	Gender	FEMALE:			SM	MD	LG	
			MALE:	Youth MD	Youth LG	SM	MD	LG	XL
Signature of entrant		Signature of Parent/Gua	rdian if under 18		Date		_		

Please enclose nontransferable or refundable entry fee \$15.00 (on or before 11/1, \$20.00 (on or before 11/9) or \$25.00 late and race day.

Make checks payable to: WI-IL Border War. Mail entries to: WI/-IL Border War, P.O. Box 1346, Kenosha, WI 53401