

**Jackson R-2 School District**  
**Milk Mustache 5k & 1 mile**  
**Saturday, April 18th, 2020**

**Orchard Elementary School**  
 (1402 Orchard Drive, Jackson, MO 63755)

**Race Time: 8:00 a.m. Registration: 7:00 – 7:30 a.m.**

All proceeds benefit the Power Pack Program, which provides weekend meals to JR2 students in need.

**Race Fees:** Adult (>18): \$30 5k  
 \$20 1 Mile  
 Children (18 & under): \$10




\*T-shirt Gildan 50/50 blend. Unisex. Black

\*Those registered by **March 20th** are guaranteed a t-shirt

**Make checks payable to Jackson R-2 School District**  
**Memo Line: JR-2 Power Packs**

Awards given to overall M/F & the top 3 in age groups: <6, 6-7, 8-9, 10-12, 13-18, 19-29, 30-39, 40-49, 50-59, 60+

<p><b>'Like' us on</b> </p> <p>@JR2MilkMustacheDash        #MilkMustacheDash        #JR2LiveHealthy</p>	<p><b><u>Registration Turn In/ Packet Pickup:</u></b>          Jackson R-2 Administration Office          614 East Adams., Jackson, MO. 63755          (243-9501)          Packet Pickup: April 16-17<sup>th</sup>, 7:30-4:30 pm</p>	<p><b>Online Registration:</b>  <a href="https://localraces.com/jacksonr2schools/milk-mustache-dash-5k-2020#">https://localraces.com/jacksonr2schools/milk-mustache-dash-5k-2020#</a></p>
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**Registration form & money due by March 20<sup>th</sup> for guaranteed T-shirt**

Name: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Gender: M F

Race Entered (circle one): 5k 1 Mile

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Email \_\_\_\_\_ Phone # \_\_\_\_\_

Shirt Size: (circle one): Youth S M L; Adult S M L XL XXL +\$5

**Are you a member of Cape Girardeau Road Runners?**

Yes No

**Race Packet Delivery Method** (choose one):

Home with student   
 Student Name \_\_\_\_\_  
 Building & Homeroom \_\_\_\_\_  
 Teacher: \_\_\_\_\_

Pick-up at Board Office   
 (614 E Adams St.)  
**P/u: April 16-17, 7:30-4:30 pm**

JR2 Employee   
 Building \_\_\_\_\_

**Release Waiver:** I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I assume all risks associated with this event, including, but not limited to falls, contact with other participants, the effects of weather, traffic and road conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing the facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Jackson R-2 School District and City of Jackson, their representatives and successors from all claims or liabilities of any kind arising from participation in this race.

Entrants Signature (parent signature if under 18 years of age) \_\_\_\_\_ Date \_\_\_\_\_