

2020 MCstrong 5K Classic+

To benefit The Michael Collins Foundation

Saturday, April 18, 2020 | The Corn Crib, Normal, IL

7:30-8:30 a.m. check-in | 9 a.m. start time (rain or shine)

Packet pick-up is from 4-6 p.m. on Friday, April 17th at Fleet Feet and Saturday from 7:30-8:30 a.m. at The Corn Crib

*If you are unable to pick up your packet and t-shirt on Friday or Saturday, you relinquish it to the Michael Collins Foundation. Please plan ahead for pick up. The only exceptions are virtual participants who may opt to have their t-shirt mailed.

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PLEASE COMPLETE ONE FO	ORM PER PARTICIPANT	j .	
	M / F		
Name	Gender	Phone	
Address			
City	State	Zip	
			/
Email	Age as of 4/	/18/20 Birthda	у
I'm participating in (circle one):	5K Run 1 Mile Walk	Virtual Participant	
			.
Select shirt style and size: ADUL	TTSHIRT: SMLXL	XXL YOUTH TSHIRT:	S M L XL
ADULT WOMEN'S RACERBACK TA	• • •	M L XL XXL	
*Shirts are only guaranteed for partic	ipants registered BEFORE Ap	oril 9 th (cutoff is 11:59 p.m. on A	pril 8 th)
Awards for overall male and female f	inishers and 1 st place men and	d women in the following age g	roups:
19 & under; 20-24; 25-29; 30-34; 35-	39; 40-44; 45-49; 50-54; 55-5	9; 60-64; 65 & over	
n consideration of the foregoing, I for myself, my exe Heartland Community College and other sponsors a			
but of my and my families' participation in The MCstr rained to participate in this event. I acknowledge that	ong 5K Classic+. I attest and verify that I h	ave full knowledge of risk involved in this ev	vent and I am physically fit and
conditions on race day are unsafe. In the event of a shine) are donated to the Michael Collins Foundation	cancellation no refunds of the entry fee or a		
Signature of Participant (or parent/c	auardian if participant is under	18 years of ago)	Date
	guarulari il participarit is unuer	To years of age)	Dale
PAYMENT INFORMATION			
Registration Fee: \$25 Through N	March 31 st \$30 April 1 st	* Add \$2.50 for racerback	tank
Race entry fee:	Pay it Forward Donation:	Total Enclosed	: \$
Payment Method: 🔲 Cash	Check (please make checks	payable to The Michael Collins Fo	oundation)
Mail to:			
The Michael Collins Foundation PO Box 19		OU HAVE COMPLETED THIS FO	
Hudson, IL 61748	INCLUDING TOUR SIGN	ATURE. INCOMPLETE FORMS C	ANNUT DE PRUCESSED.

For More Information: Rich Beal (309) 212-2412 runrich1949@gmail.com