

# Only Fools Run at Midnight Event Rules

- All entrants must decide on either the 5k or 1 mile, and they must finish the race while staying on course.
- Pre-registration ends at **5pm** on **June 11th**. Race night registration begins at **10:30pm**.
- **Parents or guardians must sign for all participants under the age of 18. No exceptions.**
- **Centipedes** are five or more finishers connected in some form or fashion.
- **Costume judging** begins at **11pm**, ending at **11:45pm**, sharp!
- People of all abilities are welcome in the wheelchair division. Scooters, power wheelchairs and service animals welcome *only if needed as an accommodation. No exceptions!*
- **Any unclaimed shirts will be released after the race to interested participants.**

## Centipede and Costume Prizes:

- Flightseeing
- AK Brew Co. Swag
- Whale Watching
- Sunglasses
- Shirts
- Water Bottles
- Fresh Fudge
- And More!



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# 31st Annual ONLY FOOLS RUN AT MIDNIGHT

**11:59pm Saturday, June 13th  
Centennial Hall**

**T-Shirts for the first 550 runners!**

**Compete for wildest centipede!**

**Awards for top finishers!**

**Prizes for best costumes!**

A FUNdraiser for



463-6422

www.ktoo.org

justins@ktoo.org

## Where do all the dollars go?

This year's funds will stay in Southeast to support **SAIL** and **KTOO Radio!**

**SAIL** is a Center for Independent Living and an Aging and Disability Resource Center serving People with Disabilities of all ages and seniors throughout Southeast Alaska.

With offices in Juneau, Ketchikan, Sitka and Haines, **SAIL's mission** is to *inspire personal independence!*

**KTOO** is the Juneau-based nonprofit organization that provides a variety of telecommunications services to Juneau and statewide audiences.

Through innovative technology, KTOO connects our community to a wide range of local, national and global media; promotes civic participation; and embraces diverse viewpoints and cultures.

**For more information or to donate:**

[www.sailinc.org](http://www.sailinc.org)

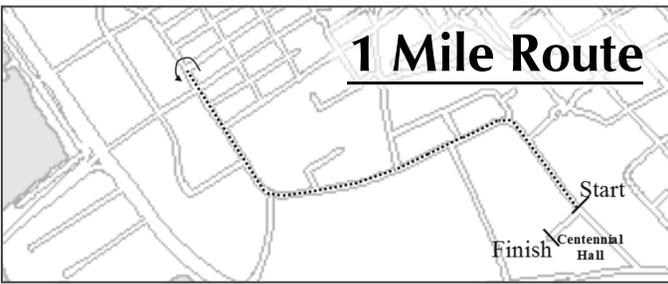
[www.ktoo.org](http://www.ktoo.org)



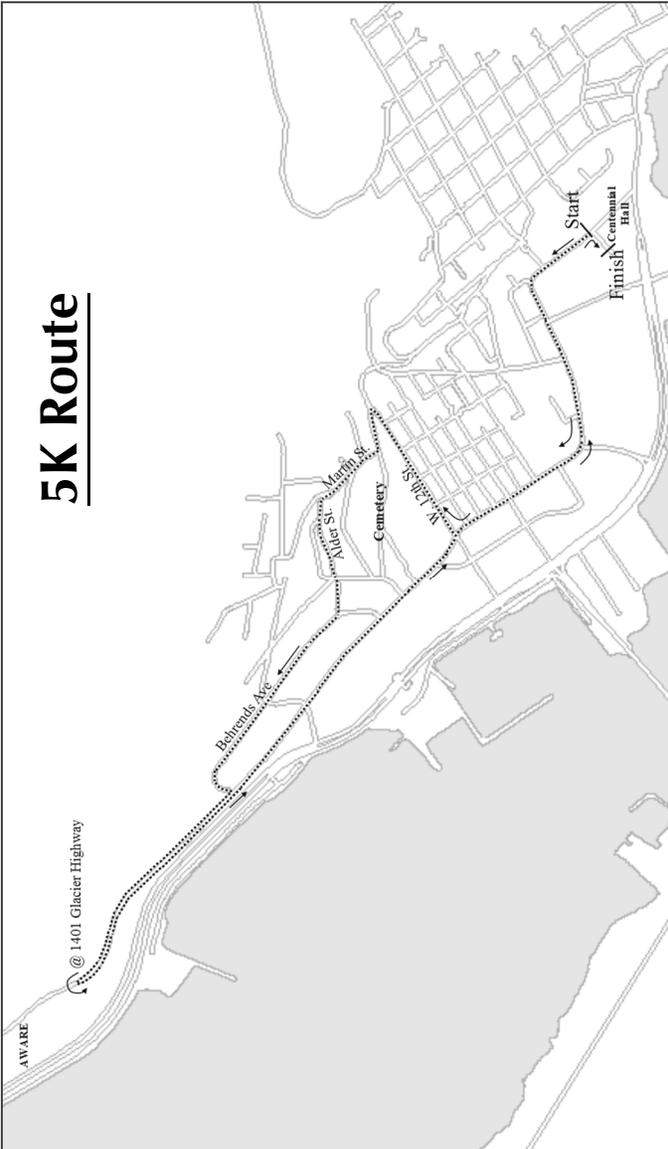
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## 1 Mile Route



## 5K Route



# Registration Form

Turn entry form and fee into either **JRC/The Alaska Club location**, either **First Bank location**, **Pavitt Health and Fitness**, the **Nugget Alaskan Outfitter**, **SAIL** (3225 Hospital Dr.) or **KTOO** (360 Egan Dr.)

Name/Family/Centipede Name (if applicable) \_\_\_\_\_

Contact Phone \_\_\_\_\_ Email \_\_\_\_\_

\***Early Registration** ends at 5pm on June 11th.  
 \***Race Night Registration** begins at 10:30pm at Centennial Hall.

\_\_\_\_\_ X \$20 / \$25 = \$ \_\_\_\_\_  
 (# of people) (by June 11) / (night-of race)

*I would like to make an additional donation to SAIL and KTOO in the following amount:* \_\_\_\_\_

**Total Due** (fees from above) \$ \_\_\_\_\_  
 (Checks Payable to KTOO)

**\*\*Please list shirt size, age, event, and gender for each participant. All participants/guardians MUST sign form!** →

**DISABLED SPORTS USA INSURANCE WAIVER & RELEASE OF LIABILITY FORM** In consideration of being allowed to participate in any way in Disabled Sports USA and Southeast Alaska Independent Living related events and activities, I and/or the minor participant, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, the undersigned: 1. Agree that prior to participating, I will inspect, or if a parent and/or legal guardian I will instruct the minor participant to inspect, the facilities and equipment to be used, and if I believe, to the best of my ability, that anything is unsafe, I and/or the minor participant will immediately advise Disabled Sports USA and Southeast Alaska Independent Living of such condition(s) and refuse to participate. 2. Acknowledge and fully understand that I and/or the minor participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result only from my own actions, inactions or negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time. 3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death. 4. Release, waive, discharge and covenant not to sue Disabled Sports USA and Southeast Alaska Independent Living, its affiliated clubs, their representative administrators, directors, agents, coaches, other employees, and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, their heirs, and if applicable, owners and leasers of premises used to

conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise. **I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE NOT CHANGED IT ORALLY, AND SIGN IT VOLUNTARILY.**

**Unisex Shirt Sizes:**  
 Youth S, XS, S, M, L, XL, XXL, XXXL

1. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile

2. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile

3. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile

4. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile

5. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile

6. NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 (OR GUARDIAN SIGNATURE)

AGE \_\_\_\_\_ GENDER \_\_\_\_\_ SHIRT SIZE \_\_\_\_\_  
 5K  1 Mile  Wheelchair 5K  Wheelchair 1 Mile