

# Dr. Javier Saenz Middle School

39200 Mile 7 Road – Peñitas 78576

(956)-519-4007 – Fax: 519-4016

## 2<sup>nd</sup> Annual

### Dr. Javier Saenz Middle School Fellowship 5K Run *Fundraiser*

#### WALKERS WELCOME

**DATE:** May 28, 2011 (Saturday)  
**HOSTED BY:** Dr. Javier Saenz Middle School  
**PLACE:** Dr. Javier Saenz Middle School Campus  
**ENTRY FEE:** \$5.00 Registration Race start set for 7:30 A. M. SHARP!  
*Make checks payable to: Dr. Javier Saenz Middle School and send to the address listed above attention: Ignacio Alaniz Jr.*  
**AWARDS:** Medals to 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> place finishers in each Division  
**DIVISIONS:** 14U, 15-19, 20-29, 30-39, 40-49, 50-59, 60 & Over  
Awards in both Men and Women's Divisions  
**T-SHIRTS:** Guaranteed to the first one hundred (100) entrants  
**INFORMATION:** Call *Ignacio Alaniz Jr. at 519-4007*

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**Print Name Clearly:** \_\_\_\_\_ **Sex:** Male / Female

**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **T-Shirt Size:** Med., Large, XL

**WAIVER STATEMENT:** I waive any and all claims for myself, my administrator, and my heirs against all officials, sponsors and organizations, executors of the State of Texas, Texas Highway Department, County of Hidalgo, City of La Joya, Dr. Javier Saenz Middle School, La Joya I.S.D. and any and all volunteers connected with the Community Fellowship Run for injury or illness which is directly or indirectly a result from my participation in this event. I attest that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in this event. If I should suffer injury or illness, I authorize officials to have me transported to a medical facility at my expense.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARENT / GUARDIAN SIGNATURE** \_\_\_\_\_

(If under 18 years of age – parent's signature required)