



# FREEDOM DAY 4-MILER

**July 4th ♦ 8:00am ♦ Woodlawn Lake**

Register **ONLINE** at *active.com*  
or **BY MAIL** send entry to:  
Scott Peacock c/o Freedom 4 Miler  
7764 Mountain Trail, Boerne, TX 78015



Entry Fee \$20 (\$18 for SARR/Military)  
Race Day = \$25 for All



Flat course around beautiful  
Woodlawn Lake.

**Packet Pick-up:** July 2 & 3, 11am-6pm  
at Soler's Sports, 5933 Broadway  
or July 4 at Woodlawn, 7:00-7:45am

Come for the race, stay for  
the city celebration & fireworks.

Awards to Top Male,  
Female & AgeGroups.

For more info contact Scott Peacock at  
(210)862-8782 ♦ runsatx@gmail.com  
[www.saroadrunners.com](http://www.saroadrunners.com)  
[www.alamoseries.com](http://www.alamoseries.com)

Race parking will be  
at Jefferson High School  
with shuttle service.



NAME: \_\_\_\_\_ AGE on 7/4/2009: \_\_\_\_\_ MALE [ ] FEMALE [ ]

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE #: \_\_\_\_\_

T-SHIRT SIZE (shirts for first 500 registrants only): Small [ ] Medium [ ] Large [ ] XL [ ]

**WAIVER:** I know that running and volunteering to work in club races is potentially hazardous. I should not enter or run in club activities unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the activity. I assume all risks associated with running and volunteering to work in club races including but not limited to falls, contact with other participants, the effects of weather (including heat and humidity), the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your acceptance of my application for membership, I, for myself and anyone entitled to act on my behalf, waive and release the RoadRunners Club of America, the San Antonio RoadRunners, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities even though that liability might arise out of negligence or carelessness on the part of the persons named in this waiver.

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

(Parent signature if under 18)

AMOUNT: \_\_\_\_\_ CHECK #: \_\_\_\_\_ (Make checks payable to SARR)