



# TEXAS

HILL COUNTRY  
—SERIES—  
HALF MARATHON · 10K · 5K

To expedite your race entry, please fill out **BOTH PAGES** and mail them in.

—▶ I am registering for (CHECK ONE): ☐ Individual Race ☐ Series (see Option 1 and 2)

## INDIVIDUAL RACE Race Registration – Check ONE box



**JAN 5 • SAT**

☐ 5k | \$40 ☐ 10k | \$45  
☐ 13.1 | \$75



**FEB 2 • SAT**

☐ 5k | \$40 ☐ 10k | \$45  
☐ 13.1 | \$75



**MAR 10 • SUN**

☐ 5k | \$40 ☐ 10k | \$45  
☐ 13.1 | \$75



**APR 6 • SAT**

☐ 5k | \$40 ☐ 10k | \$45  
☐ 13.1 | \$75

**NOTE:** Early registration prices are shown. 15 days prior to race day add \$5. Race day add \$10. Dates, prices and locations are subject to change.

## SERIES Registration – Same distance *OR* Mix 'n' Match

### —▶ OPTION ONE: SAME DISTANCE REGISTRATION:

☐ Sign me up for ALL FOUR (4) **5k** distances: **\$150** (SAVE \$10!)

☐ Sign me up for ALL FOUR (4) **10k** distances: **\$170** (SAVE \$10!)

☐ Sign me up for ALL FOUR (4) **HALF MARATHON** distances: **\$199** (SAVE OVER \$100!)

### —▶ OPTION TWO: MIX AND MATCH DISTANCES – Check ONE box per race

☐ Sign me up for a MIX 'N' MATCH: **\$199**



**JAN 5 • SAT**

☐ 5k  
☐ 10k  
☐ 13.1

**VIRTUAL**

☐ 5k  
☐ 10k  
☐ 13.1



**FEB 2 • SAT**

☐ 5k  
☐ 10k  
☐ 13.1

**VIRTUAL**

☐ 5k  
☐ 10k  
☐ 13.1



**MAR 10 • SUN**

☐ 5k  
☐ 10k  
☐ 13.1

**VIRTUAL**

☐ 5k  
☐ 10k  
☐ 13.1



**APR 6 • SAT**

☐ 5k  
☐ 10k  
☐ 13.1

**VIRTUAL**

☐ 5k  
☐ 10k  
☐ 13.1

## !!!BUT WAIT!!!

### To expedite the registration process, please double check:

- Check off INDIVIDUAL RACE or SERIES box
- If you're doing INDIVIDUAL RACE, select the RACE and the DISTANCE
- If you're doing SERIES, check Option One for same distances, or Option Two for mix 'n' match. If Mix 'n' Match: please specify the distance for each individual race.

#### Adult technical shirt:

☐ MALE ☐ FEMALE

☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ XXL (add \$5) ☐ XXXL (add \$5)

First Name \_\_\_\_\_ MI \_\_\_\_\_ Day Phone \_\_\_\_\_

Last Name \_\_\_\_\_ Birth date: (MM/DD/YYYY) \_\_\_\_\_ Age on race day \_\_\_\_\_

Mailing Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_



Mail to/make checks payable to:  
**ScallyWompus Events**  
100 N. Santa Rosa Street PH10  
San Antonio, TX 78207



Total amount including donation: \$ \_\_\_\_\_

Payment Method: ☐ Credit Card ☐ Check

#### Fill out for credit card information

Name appears on card: \_\_\_\_\_ M/CVisa: \_\_\_\_\_

Card # \_\_\_\_\_ Exp: \_\_\_\_\_ CVV \_\_\_\_\_

WAIVER AND RELEASE: I ACKNOWLEDGE AND ACCEPT THERE ARE NO REFUNDS (IN CASE OF INCLEMENT WEATHER OR ANY CIRCUMSTANCE). IN CONSIDERATION OF THIS ENTRY, I, FOR MYSELF, MY EXECUTORS, ADMINISTRATORS, AND ASSIGNEES DO HEREBY AGREE TO ASSUME FULL RESPONSIBILITY FOR MY OWN SAFETY AND TO SAVE AND HOLD HARMLESS, SCALLYWOMPUS EVENTS, CITY OF SAN ANTONIO, EVENT SPONSORS, OFFICIALS, VOLUNTEERS, AND ANY PERSONS AFFILIATED WITH THE EVENT, AND I WAIVE ANY AND ALL CLAIMS AGAINST THE CITY OF SAN ANTONIO, SCALLYWOMPUS EVENTS, AND EVENT STAFF/VOLUNTEERS OR OTHERWISE AFFILIATED WITH THE EVENT, THEREOF BY PARTICIPATING IN THE MIDSUMMER NIGHTS DREAM. I ATTEST I AM PHYSICALLY FIT AND SUFFICIENTLY TRAINED TO PARTICIPATE IN THE SAME. I ASSUME FULL RESPONSIBILITY FOR MY SAFETY. ENTRY FEES ARE NOT REFUNDABLE. I HEREBY GRANT PERMISSION TO SCALLYWOMPUS EVENTS AND ITS ASSOCIATES TO PHOTOGRAPH, AND RECORD VIDEO OF, MY IMAGE AND VOICE, AND/OR THAT OF MY MINOR CHILDREN (IF APPLICABLE) AND TO EDIT, CROP OR RETOUCH SUCH PHOTOGRAPHS AND VIDEOS, AND WAIVE ANY RIGHT TO INSPECT THE FINAL PHOTOGRAPHS AND VIDEOS. I HEREBY CONSENT TO AND PERMIT PHOTOGRAPHS AND VIDEOS OF ME AND/OR THOSE OF MY MINOR CHILDREN TO BE USED BY SCALLYWOMPUS EVENTS AND ITS ASSOCIATES WORLDWIDE FOR ANY PURPOSE, INCLUDING ADVERTISEMENT PURPOSES, AND IN ANY MEDIUM, INCLUDING PRINT AND ELECTRONIC. I UNDERSTAND THAT SCALLYWOMPUS EVENTS AND ITS AGENTS MAY USE SUCH PHOTOGRAPHS OR VIDEOS WITH OR WITHOUT ASSOCIATING NAMES THERETO. I FURTHER WAIVE ANY CLAIM FOR COMPENSATION OF ANY KIND FOR SCALLYWOMPUS EVENTS OR ITS ASSOCIATES' USE OR PUBLICATION OF PHOTOGRAPHS OR VIDEOS OF ME AND/OR THOSE OF MY MINOR CHILDREN (IF APPLICABLE).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If under 18, parent/guardian signature)