

WHEN & WHERE

The 5k race will take place on Saturday, May 19, 2007, at 7:45 am in beautiful, shaded Bear Creek Park located on Clay Road between Highway 6 and Eldridge Parkway in West Houston.

Directions: From downtown Houston take I-10 West to Highway 6. Go north to Clay Road. Turn right (east) to Bear Creek Drive. Turn right, park, and make your way to Shelter 6.

THE COURSE

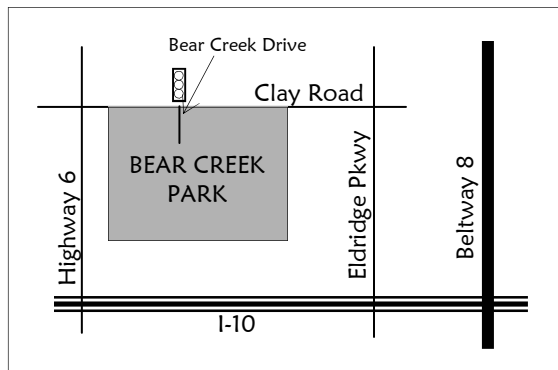
This loop road course on Golbow is flat and runs through a shaded, wooded area near the Bear Creek Golf course. The course is certified (TX02019ETM) and chip timed. Water stations will be set up at the starting/finish line, and along the course. Qualified medical assistance will be available near the start-finish area.

RACE AWARDS

Overall male and female and 1st Masters male and female will be awarded along with age group awards to the first through third male and female finishers in the following age groups:

- 19 and under
- 20-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70 and older

www.celiacrun.com



HOW TO REGISTER

Online: Registration is available online at www.celiacrun.com. Entry fee is \$20.

By mail: Use the registration form in this brochure. Entry fee is \$25

In person: Register in person at packet pickup. Entry fee is \$25.

PACKET PICKUP

Friday May 18, 2007

11am-7pm

Finish Strong Sports, 14620 Memorial Drive
(Memorial at Dairy Ashford)

Saturday, May 19, 2007 (Race Day)

6:30am-7:30am

Bear Creek Park, Pavilion 6

PARKING

There is ample free parking available at or near the race site in Bear Creek Park. Please use the Bear Creek Park Drive entrance off of Clay Road.

Proceeds will go to support the National Foundation for Celiac Awareness (NFCA), the Gluten Intolerance Group (GIG) and the University of Maryland Center for Celiac Research.



REGISTRATION FORM

5k Run 5k Walk Sleep-In

Name _____

Address _____

City _____

Zip _____

Phone _____

Email _____

Male Female

Birthdate _____

Age on Race Day _____

T-Shirt Size (circle one)

S M L XL XXL

5k Run/5k Walk \$25 \$ _____

(Save \$5 by registering online at www.celiacrun.com)

Sleep-In Option \$25 \$ _____

(Get a T-shirt and packet without showing up on race day!)

Donation \$ _____

TOTAL: \$ _____

Make checks payable and mail to:

Celiac Run

11419 Oak Spring Drive, Houston, TX 77043

PARTICIPANT WAIVER In consideration of your accepting this entry form, I, the undersigned, intending to be legally bound for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Celiac Run/Walk, The Gluten Intolerance Group, the Celiac Sprue Association, event sponsors, race directors, event producers, volunteers, all states, cities, countries, or their governmental bodies or locations in which events or parts of events are held. I attest and verify that I am physically fit and have sufficiently trained for the competition of this event and my physical condition has been verified by a licensed medical doctor. Further, I grant for permission to any and all of the foregoing to use photographs, videotapes, motion pictures and recordings of me, or any other record of this event for any legitimate purpose. My parent or legal guardian is signing this for me and authorizes medical care should I be under the age of 18. Since the course is in a flood plain, this event may have to be modified or canceled due to weather. There will be NO REFUNDS.

Signature: _____

(Parent/Guardian must sign if under 18)

Date: _____