



Dear Race Participant,

It is my pleasure to invite you to participate in 2011 Rappahannock River Run hosted by the St. Margaret's School Alumnae Association. In its 13th year, this event offers competitive and recreational runners or walkers alike to come together for a 5k, 3.1 mile course through scenic Tappahannock, Virginia.

Race day will be held on Saturday, October 15, 2011 at 444 Water Lane, St. Margaret's School. The course will begin at St. Margaret's Hall and travel through the town of Tappahannock, along the Rappahannock River, and return to the school's campus. Registration and check-in for runners/walkers is available on Saturday from 7:00AM- 7:45AM, the race will begin promptly at 8:00AM.

The cost of an individual participant is \$20 prior to October 1, 2011. Running groups are welcome and encouraged. Group rates are available upon request with group registration. For more information regarding the details of the Rappahannock River Run or to register, I can be contacted at 804.443.3357 x 3016 or at sweakley@sms.org.

I hope that you will participate in the 13th Annual Rappahannock River Run/Walk by joining us as a runner/walker.

Thank you,

Sarah C. Weakley '04
Event Coordinator

Please make checks payable to St. Margaret's School and mail to:

*Sarah C. Weakley
Rappahannock River Run
St. Margaret's School
P.O. Box 158
Tappahannock, VA 22560*



**13th Annual St. Margaret's School
Rappahannock River Run
Tappahannock, Virginia
October 15, 2011**

RUNNER APPLICATION

Details: Advance Registration—\$20.00
 Registration after October 1—\$25.00
 Race Day Registration (7:00 – 7:45 a.m.) —\$ 25.00
 Race begins at 8:00 a.m.

Entry Categories: Male & Female—
 ∅ 18 & under
 ∅ 19-39
 ∅ 40-54
 ∅ 55 & up

Awards: All pre-registrants will receive an official race T-Shirt. Shirts will be available to race day registrants while supplies last. Special awards will be given to the first SMS parent, student and alumna to cross the finish line!

-----CLIP and RETURN-----

NAME _____ **RUNNER:** _____ **WALKER:** _____

D.O.B. _____ **SEX:** M ___ F ___ **SHIRT SIZE:** Small ___ Medium ___ Large ___ X-Large ___

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____ **FAX** _____

E-MAIL _____

Waiver/release must be signed, dated, and submitted with registration. In consideration of the acceptance of this entry, I, the undersigned, assume full and complete responsibility for any injury or accident which may occur during the event or while I am on the premises of the event. I attest and verify that I am physically fit and have sufficiently trained for this event. Furthermore, I release and hold harmless the sponsors, organizers, volunteers, and all other persons or entities associated with this event from any and all claims and liabilities of any kind arising out of my participation.

Parent or Guardian Signature Date

Participant Signature Date