

## Route of Race



The course is 5 kilometers (3.1 miles) starting at John's Bar on Madison Street. The route will take participants by Beaver Dam Lake and through the countryside of Beaver Dam before crossing the finish line at John's Bar.

\* Parking is available in the front and back of John's Bar.

## In Honor of Tom Maher

I decided to organize this 5K run/walk in honor of my dad's battle with Prostate Cancer. He was diagnosed with Prostate Cancer in January 2010. After his diagnosis, Tom endured 45 radiation treatments over a three month period. After finishing these radiation treatments, his PSA count was found to be in the normal range. He continues to have PSA tests every six months for the next five years to be considered cancer free. To demonstrate how much I love and respect my dad for what he has been through, I wanted to do something in his honor and for this horrible disease that impacts one in six men. Therefore, the proceeds of this event will be donated to the UW Carbone Cancer Center for Prostate Cancer research, in hopes of finding a cure!!

A huge thank you to all of the sponsors and donations that have made this dream become reality!



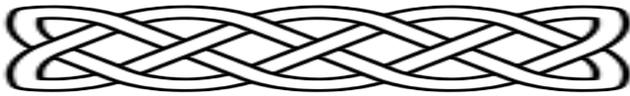
# Maher's Halfway Leprechaun Leap



September 17, 2011  
John's Bar  
1201 Madison Street  
Beaver Dam, WI

Proceeds to benefit  
Prostate Cancer  
research at UW  
Carbone Cancer  
Center





Welcome to the Maher's Halfway Leprechaun Leap

5K run/walk to benefit Prostate Cancer

Saturday September 17, 2011

(Rain or shine!)

John's Bar in Beaver Dam

Pick-up/Registration opens at 9:30 am

Race starts at 10:30 am

21 years of age and older participants whom finish the race will receive a FREE beer

**Entry Fee**

Pre-registration (received by September 1st)...\$ 20.00

Day of Race .....\$ 25.00

We have no age limit, but please do not bring any bikes, roller blades, heeleys, skateboards, or animals. Thank you for your understanding.

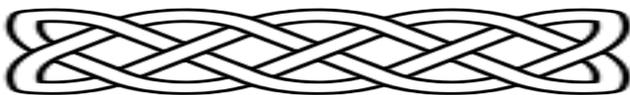
**Awards**

Awards for the race will be given to the top three overall male and female finishers.

**Refreshments**

Complimentary beverage and food will be available for all participants following the race.

For more information, please contact: Melissa Maher at: 920.356.9188 or maher@dodgeland.k12.wi.us



**Pot O' Gold Games**

After the awards are distributed, please stay for some more halfway to St. Patrick's Day fun!

To participate in the Pot O' Gold Games, individuals will need to pay \$5.00. Participants will receive a score card for this event. They will need to throw 3 darts, 3 horseshoes, 3 bean bags, and serve three volleyballs over the net. After completing each of the games, participants will need to write their score down on the card and move on to the next game.

After all individuals have finished the games, the scores will be tallied up to determine the winner of the games. The individual with the highest score for all of the games will win a prize.

The money that is collected from the Pot O' Gold Games will be donated to the UW Carbone Cancer Center for Prostate Cancer research.



**Registration**

Please print clearly and complete a separate form for each participant. Photocopies are acceptable.

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Phone\_\_\_\_\_ e-mail\_\_\_\_\_

Age (day of race)\_\_\_\_\_ Gender\_\_\_\_\_

T-shirt size (Adult only): Small\_\_\_\_\_ Medium\_\_\_\_\_

Large\_\_\_\_\_ XL\_\_\_\_\_ XXL\_\_\_\_\_

Consent and Liability Waiver: I know that running a race can be a dangerous activity. I should not enter and run 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 run. I assume all risks associated with running in the event, including, but not limited to: falls, contact with other participants, the effects of the weather, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, waive and release any and all sponsors, their representatives and successors, from all claims or liability for death, personal injury, or property damage of any kind or nature whatsoever arising out of, or in course of, my participating in this event whether same be caused by negligence or fault. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. The undersigned further grants full permission to sponsors and agents authorized by them to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any purpose. Minors accepted only with a parent or guardian signature, and it must be signed to participate.

Signature\_\_\_\_\_

Date\_\_\_\_\_

**Complete and mail with payment to:**

**Ms. Melissa Maher**

**N6491 County Road DE**

**Beaver Dam, WI 53916**