

The OPTIMIST CLUB of PERDIDO BAY

Presents the 23rd mullet Festival, Monday - September 7, 2009

With

Bud Morris Memorial 5K Run for the Mullet; includes 5K Run/Walk & 1 mile Fun Run/Walk

Race Director: Dr. Keith Cooper

Race information: Andy Wilkinson (251) 961-1343
 Lee Hoffman (251) 962-3339
 Bill Cornell (251) 962-2855

Start / Finish at Lillian Community Club

5K Starts 7:30 a.m.

1 Mile Fun Ran Starts 8:15 a.m.

On site registration 6:15 a.m. to 7:15 a.m.

T-Shirt pick-up Race Day at registration table

T-Shirts Guaranteed day of race to pre-registered

T-Shirt classically features the "Famous Mr. Mullet"

Cost

\$15.00 Pre-Registration \$20.00 Race Day

Pre-Registration MUST be post marked by September 2, 2009

Includes: Post Race Party with beverages & door prizes.

AWARDS

NO Multiple Awards given

5K Race

1st, 2nd & 3rd Men & Women overall.

1st, 2nd & 3rd top men and women masters 40+.

1st, 2nd & 3rd top men and women grand masters 50+.

1st, 2nd & 3rd top men & women senior grand masters 60+.

5K Age Groups

1st, 2nd & 3rd - 9 and under, 10-14, 15-19,

10-24, 25-29, 30-34, 35-39, 40-44, 45-49,

50-54, 55-59, 60-64, 65-69, 70-74, 75 & over.

5K Wheelchair

1st, 2nd & 3rd - Top three men & women

5K Walkers

1st, 2nd & 3rd Top three men & women.

Plus top three men & women in each age group.

12 & under, 13-20, 21-34, 35-49, and 50 & over.



FREE

One Mile Fun Run **Participants MUST register**

Awards for: Top three **registered** men and women

NOTE: All fun run finishers will receive Ribbons

"Given as they cross the finish line"

Course

Rolling, rural (paved & dirt) roads in Lillian, AL.

Split Times called at each mile.

Facilities Lillian Community Club

Aid EMT follow truck.

Mail Entry To:

RUN FOR THE MULLET

P.O. BOX 87

LILLIAN, AL. 36549

Check as applicable:

5K Run

5K Walker

FREE 1 Mile Fun Run

Shirt Size

Small

Medium

Large

X Large

XX Large

Registration and Race Information

Andy Wilkinson (251) 961-1343

Lee Hoffman (251)962-3339

Registration fee enclosed: \$15 Pre-registration

\$20 Race Day

Please Print

Name _____ Age on Race Day _____

Address _____

Street or P.O. Box

City

State

Zip

Phone () _____

Male _____

Female _____

Post Office

← To Foley Highway 98 To Florida →

Lillian
Methodist Church

Lillian
Community
Club

Fire
Dept

Release Form: I hereby waive any and all claims forever against all related sponsors for any injury that may occur directly or in directly due to my participation in the said race.

Signature _____ Date _____

Parent or guardian signature if under age of 18