

Village of Gurnee 2024
30th ANNUAL
Jon Callaghan Memorial Turkey Trot
5K fun run & walk



SPONSORED BY

The Gurnee Police Department and The Gurnee Fire Department

Come join us in this annual fund-raiser. Proceeds from entry fees will be split between the Jon Callaghan Memorial Fund and the Gurnee Community Church Youth Work Camp.

RUN INFORMATION

- Date:** Thanksgiving Day—November 28
- Start Time:** 8:00 am “sharp”
- Starting Line:** In front of Insurancenter, Stolarick & Company, Inc.,
4673 Grand Avenue, Gurnee
- Check-in Time:** 7:00 am—The Gurnee Old Grand Ave. Fire Station,
4580 Grand Avenue, Gurnee
- Entry Fee:** \$30.00 registration fee
(age 10 and under runs/walks FREE!)
Pre-registration ends November 25th, 2024.
After 11-25-24 please register race day at
the fire station.
- T-shirts:** Provided to the **first 350 paid participants
to check in on race day**
- Payment:** (Make checks payable to the Gurnee Turkey Trot)
Mail check and completed waiver form to:
The Gurnee Turkey Trot
325 North O’Plaine Road
Gurnee, IL 60031
- Web site:** For more info and downloads go to gurneeturkeytrot2024.eventbrite.com



— FORM MAY BE COPIED FOR ADDITIONAL ENTRANTS —

Waiver: In consideration of my participation in the “30th Annual Village of Gurnee Turkey Trot 5K Fun Run & Walk,” I, for myself, my executors, administrators, and assignees, do hereby release and discharge all race organizers, sponsors, volunteers, and benefactors of the “30th Annual Village of Gurnee Turkey Trot 5K Fun Run & Walk,” and hold and save them harmless for and against any and all actions, claims, liabilities, loss damage, expense of whatever nature, including attorney fees, which may at any time be incurred by my preparation for aforesaid race. I attest and verify my knowledge of the risks involved in this event and am physically fit and sufficiently trained to participate in this event.

PLEASE PRINT NAME

E-MAIL ADDRESS

SIGNATURE

ADDRESS

(IF UNDER 18, PARENT OR GUARDIAN MUST SIGN)

CITY, STATE

ZIP CODE

CHECK CASH Please specify your payment method

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OPTIONAL Sponsor Sheet

Please Return Your Donations
No Later Than 14 Days After Event

Sponsor Name

Phone Number

Flat Donation

_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
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_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.
_____	()	\$ _____	_____ pd.

Participant Name _____ Event Date _____

Address _____ City _____ State _____ Zip _____

Day Ph. _____ Eve. Ph. _____ Total \$ Collected _____

(Make checks payable to the Gurnee Turkey Trot)