



**16th Annual Helotes Half-Marathon**  
 13.1 miles • 7:30 a.m. start  
 Cost: \$25 (after 9/30- \$35)

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**5K Run/Walk**  
 3.1 miles • 7:30 a.m. start  
 Cost: \$15 (after 9/30- \$25)

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**Stroll & Roll**  
 1.25 miles • 7:30 a.m. start  
 Cost: \$10 (after 9/30- \$20)

**Course starts and finishes at Soler's Tri Sports**  
 14405 Old Bandera Road

**SPONSORS**

A portion of the proceeds benefit the Spina Bifida Association of Texas. To learn more about Spina Bifida Association of Texas, visit: [www.sbatx.org](http://www.sbatx.org).



**Texas MedClinic**  
 For Life's Little Emergencies

[www.texasmedclinic.com](http://www.texasmedclinic.com)

**SOLER'S SPORTS**

[www.rogersoler.com](http://www.rogersoler.com)

**REGISTRATION**

- 1) Online: [www.rogersoler.com](http://www.rogersoler.com) (by 10/8)
- 2) Mail in form below
- 3) In person:  
**Roger Soler's Sports**  
 2589 Jackson Keller (210-366-3701)  
 5933 Broadway (210-930-3148)  
 14405 Old Bandera (210-695-6430)

**AWARDS**

- 5K Run/Walk Participants**
- ✓ Top male and female • Top masters male and female
  - ✓ Top three male/female in age groups (14 & under , 15-19, ...to 70+)
  - ✓ Participants receive short sleeve shirt
- Half-Marathon Participants**
- ✓ Over \$1,000 in cash prizes for male and female winners (1st \$200 • 2nd \$150 • 3rd \$100 • 4th \$50)
  - ✓ Top three male/female in age groups (14 & under , 15-19, ...to 70+)
  - ✓ Participants receive long sleeve shirt
  - ✓ All finishers receive a Custom Finishers Medal

**PACKET PICK-UP (LATE REGISTRATION)**  
**Thursday, Oct. 12 and Friday, Oct. 13**  
**noon — 6 p.m.**

**Soler's Tri Sports**  
 14405 Old Bandera Road, Helotes  
 210-695-6430

Race day packet pick-up 6:00-7:15 a.m.

Don't forget the Brooks Party after the race featuring shoe/apparel giveaways!

**TEXAS MEDCLINIC 5K RUN/WALK AND HELOTES HALF-MARATHON RUN**

**RELEASE OF LIABILITY AGREEMENT**  
 In consideration for the acceptance of my entry, I, for myself, my executors, administrators and assignees do hereby agree to assume full responsibility for my own safety and to save and hold harmless Roger Soler's Sports and all race sponsors, race officials, volunteers and their employees and agents, acting officially or otherwise from any manner predicated on loss or damage to the property or the injuries to, or death of any person which may occur resulting from my participation in the Texas MedClinic Helotes Half-Marathon and 5K Run/Walk and do hereby waive any demands or claims thereof. I attest and verify that I am physically fit and sufficiently trained to participate in the same. **I understand there is no refund.** I have carefully read this agreement and fully understand its contents.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

AGE on 10/14/06: \_\_\_\_\_

DOB: \_\_\_\_\_

SEX:  M  F

T-SHIRT:  
 M  L  XL

— Select Event —

<b>Half-Marathon</b> <input type="checkbox"/> \$25 <input type="checkbox"/> \$35 (after 9/30)	<b>5K Run/Walk</b> <input type="checkbox"/> \$15 <input type="checkbox"/> \$25 (after 9/30)	<b>Stroll &amp; Roll</b> <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 (after 9/30)
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Mail check & completed form to:  
 Roger Soler's Sports  
 2589 Jackson Keller  
 San Antonio, TX 78230

Make checks payable to Roger Soler's Sports

**QUESTIONS?**  
 Contact: Roger Soler's Sports  
 Phone: 210-366-3701  
 Web: [www.rogersoler.com](http://www.rogersoler.com)

Signature (Parent's Signature If Under 18) \_\_\_\_\_ Date \_\_\_\_\_