



Saturday, September 6, 2025
Lions Park, Lena IL

Registration: 7:15-7:45am
Race Start 8:00am



**Runners and
walkers of all
abilities
welcome at
this
family-
friendly race!**

lenaparkdistrict.org | 815.369.5351



Follow us! Lena Community
Park District

HUGE THANKS TO OUR 2025 FALL FEST 5K SPONSORS!

Please support the businesses that
support us...

Platinum Presenting Sponsor:



**Scan to
register!**



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SAVENCIA
FROMAGE & DAIRY



Fall Festival 5K Run/Walk Lena Community Park District

Race Info:

Saturday, September 6, 2025

Race starts and ends at Lions Park, Lena IL

- 7:15-7:45am: Registration
Shirt & Bib Pick Up
- 8:00am: Race Start
- Fee: \$30 on or before August 20
\$35 after August 21
race shirt not guaranteed after August 21
- Age Group awards & post-race snacks provided for all participants
- Shirt & Bib Pick Up will take place on race day from 7:15-7:45am at Splash Land pool entrance. It will also be held at the Park Office, 609 N. Schuyler St., Lena on Thursday, Sept. 4 from 4:00-6:00pm

Ways to Register:

- Complete this form and return with payment to the Park Office, 609 N. Schuyler St., Lena (mail slot in front door can be used, checks payable to LCPD).
- Online at:
RaceRoster.com; search Lena Fall Festival

Questions?

- Email recreation@lenaparkdistrict.org or call 815.369.5351

Remember to visit the Lena Fall Festival on Friday and Saturday!
Parade, games, rides
And entertainment,
located in Downtown Lena.



REGISTRATION FORM

PARTICIPATION WILL BE DENIED
IF THE SIGNATURE OF AN ADULT PARTICIPANT
OR THE PARENT/GUARDIAN OF A CHILD
AND THE DATE ARE NOT ENTERED
ON THIS WAIVER.

To participants and Parent of Child: You are solely responsible for determining if you and/or your child are physically fit and/ or skilled for the program identified. It is always advisable, especially if the participant is pregnant, disabled in any way or recovering from a recent illness, injury or impairment, to consult a physician before undertaking any physical activity. By signing this form, you are certifying to the Lena Community Park District that you have authority to act as guardian of your child.

I recognize and acknowledge there are certain risks of injury to participate in this program and I voluntarily agree to assume full risk of and all injuries, damages or losses, regardless of severity, which I or my child may sustain as a result of participating in this activity, whether known or unknown present or future. This release shall extend to and be for the benefit of the Lena Community Park District.

I HAVE READ AND FULLY UNDERSTAND
THE ABOVE IMPORTANT INFORMATION,
WARNING OF RISK AND RELEASE OF ALL
CLAIMS.

Participant Signature (age 18 or older) _____ Date _____

Parent/Guardian Signature (under age 18) _____ Date _____

Emergency Contact on Race Day:

Name _____

Cell Phone Number _____

Office Use Only	
Cash	Check# _____
Total: _____	

RACE #

PLEASE PRINT LEGIBLY

Name

Address

City

State

Zip

Phone and/or Cell

Email

Date of Birth ____/____/____

Age on Race Day _____

Please check one:

male

female

Select shirt size (adult sizes only):

small

x-large

medium

2x-large

large

3x-large



Please complete and return to the Park Office; checks payable to LCPD