

DIKE HIKE

5K & 10K Run

SEPTEMBER 10, 2010



Show your city pride and help
celebrate the re-opening of the
Texas City Dike!

This scenic route will give runners a first time look at the historic Dike since Hurricane Ike's destruction in 2008. Taking participants past the waters of Galveston Bay, the Dike Hike will include a 5K, 10K, & Kids' K, as well as the Texas City Dike's Ribbon Cutting Ceremony.

For more information, contact the
Lowry Fitness Center
409-643-5984



Texas City Department of Recreation & Tourism
2010 5th Avenue North
Texas City, Texas 77592-2608
409-643-5990

www-texas-city-tx.org

Date: September 10, 2010

Place: Texas City Dike

**Pre-registration: Lowry Fitness Center
1900 5th Avenue North
Texas City, Texas 77590**



**Times: 6:00pm—Kids' K
6:30pm—10K Run
6:30pm—5K Run**

Registration Fee:

**Kids (10 & under): \$10 pre-registration
\$15 September 10th
Adults: \$15 pre-registration
\$20 September 10th**

Divisions: Men/Women/Children

11-19 years 50-59 years
20-29 years 60-69 years
30-39 years 70 years & older
40-49 years Kids' K—10 & under

Awards:

1st Place Overall Male & Female in 5K & 10K
1st Master Male & Female (age 40-49) in 5K & 10K
1st Grand Master Male & Female (age 50+) in 5K & 10K
1st & 2nd Place Male & Female in each age group
1st Place Male & Female in Kids' K Run
All Kid's K Participants will receive a ribbon

**Texas City Dike Ribbon Cutting Ceremony
will take place directly after run.**

Event Director: Kyle Pacini
City of Texas City
Recreation & Tourism Dept.

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Entry Form

Event	Pre-Register Before Sept. 10	Registration Day of Event	TOTAL
5K Run	\$15	\$20	
10K Run	\$15	\$20	
Kids' K Run	\$10	\$15	

Make checks payable to:
City of Texas City

Name _____

Age _____ Sex _____ Event _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Signature _____

Liability & Medical Release Form:

I hereby release the City of Texas City, all employees, sponsors, and personnel of all responsibility in the event of an accident or injury. I also consent to emergency and/or hospital service that may be sought out for me by tournament personnel.

Signature: _____