

# Run For The Loaves Registration Form

## Blooming Grove UMC Fall Food Shelf Fundraiser



Saturday, September 6th, 2025  
4 Mile Run/Walk  
Kids 1/4 Mile Run

Registration: 8:30 am  
Kids 1/4 Mile Run: 9:15 am  
4 Mile Walk: 9:30 am  
4 Mile Run: 10:00 am

Registration Fee: \$25.00  
Kids Run (12 & Under) \$3.00  
Entry fee will be waived if participant submits a  
donation of \$50 or more.

**"Run 4 the Loaves" T-Shirts** will be available on the day of the race for those who register by August 25th for the 4-mile run/walk. Be sure to indicate your T-shirt size. T-shirts for those who register after the deadline may be sent at a later date. If no size is indicated, the cost of the shirt will be donated.

**Prizes:** An awards ceremony will commence when the last participant finishes. Awards will be given to the top age-group finishers and the best over-all male/female. A special award will be presented to the participant who raises the most donations for the Food Shelves.



### Age Groups:

Under 12 **13-19** 20-29 **30-39** 40-49 **50-59** 60-69 **70+**

**Additional Info:** Everyone will receive a number at registration which must be worn during the race. Restrooms will be available at the event site. Water stops will be available on the course with refreshments waiting at the finish line.

**Course:** Utilizing both paved and gravel roads, through the fields of ripening corn and soybeans, the race will begin and end at the Blooming Grove United Methodist Church, located on the Steele/Waseca County line.

**Questions:** Contact Brad Saufferer  
Phone: 507-363-6579

E-mail: [runfortheloaves@yahoo.com](mailto:runfortheloaves@yahoo.com)

Last Name \_\_\_\_\_ Sex \_\_\_\_\_

First Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email: \_\_\_\_\_

Food Shelf: I wish to support \_\_\_\_\_

T-Shirt Size ☐ S ☐ M ☐ L ☐ XL

**Waiver:** I understand that running/walking a road race is a potentially dangerous activity. I should not enter and run/walk unless I am medically able and properly trained. **I understand that entry fees and donations are non-transferable. I also understand that if the race is cancelled due to inclement weather, my registration fee and/or donation will not be reimbursed but donated to the Food Shelf indicated above.** I assume all risks associated with participation in the event including but not limited to: falls, contact with other participants or spectators, the effect of the weather including heat or cold temperatures, traffic or conditions of the roads, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of our accepting my entry, I for myself and anyone entitled to act for my behalf, waive and release Blooming Grove United Methodist Church from all claims or liabilities of any kind arising out of my participation in this event even though that liability might arise out of negligence or carelessness on the part of the persons named in this waiver. **I have read and agree to the above.**

Signature \_\_\_\_\_

(Parent or guardian if under 18)

Date: \_\_\_\_\_

Entry Fee \_\_\_\_\_

Food Shelf Donation (\$50+) \_\_\_\_\_

For directions to Blooming Grove UMC  
"The Two-Steepled Church on the Prairie"  
go to [www.bloominggroveumc.org](http://www.bloominggroveumc.org)

Mail this form/entry fee to:  
Blooming Grove UMC  
PO Box 171  
Medford, MN 55049-0171

Make checks payable to:  
Blooming Grove UMC  
Denote "Food Shelf" on the  
memo line