Barnesville's 15th Annual

Santa's Spirit Sprint

Saturday, December 4th, 2021
@3:00pm at The Rock Gymnasium

A 1 Mile Racing Event Helping Kids

Help Us Go That Extra "Mile" for Needy Kids This Christmas

Directions: Interstate 70 East/West, Exit #202 (Barnesville/Dennison). Go 6 miles on State Route 800 South to 1st Red Light. Turn left. Follow signs to The Rock Gymnasium, 440 Watt Avenue, Barnesville, OH 43713
ALLPARTICIPANTS ENCOURAGED TO DRESS UP IN THEIR FAVORITE HOLIDAY OUTFIT!

Entry Fee: $16 pre-registered before Thanksgiving. $21 after and race day. As always, we will be collecting gift cards and other items to help fill the Wish Lists. For a list of items needed, please contac t the race directors.

Registration: Registration will begin @ 1:00 **Online Registration** is available at: **www.RunSignUp.com** Keyword:**Santa Sprint**

Trophies: Unique, beautifully hand-crafted, top-quality trophies will be awarded in the following categories:
Walkers: 1. Top 5 Male, Top 5 Female **2.** Top 3 Masters M/F (50+) **3.** Top 5 Over 50, Top 5 Under 50   Walkers: Please be fair to other walkers. If you register as a Walker, YOU MUST WALK the enire race. "Walking" is defined as having one foot on the ground AT ALL TIMES! Jogging or Trotting is considered slow running, NOT fast walking, even if you're a kid. **Runners: 1.** Top 5 Male, Top 5 Female **2.** Top 3 Masters M/F (40+) **3.** Top M/F in A/G: **Age Groups:** (Run Only) 9 & Under, 10-14(2), 15-19, 20-29, 30-39, 40-49, 50-59(2), 60-64, 65+ (2)   **Special Awards for Youngest & Oldest Male & Female Finishers!**

Results: Race results for this and other events will be at **www.SmileyMiles.com**

Photographs: Race photographs will be available for viewing, download, & purchasing at: **www.RonPradetto.com**

Contact Info: Carl A. Kondrach, Director (740)310-2117 ; (740)238-1833; E-mail: **carlkondrach@yahoo.com** More info can be found at: **www.RailsToTrails5k.com**   Website designed and managed by **10T Web Design** of Barnesville, OH

COVID Info: DEPENDING on State/local mandates, All participants **MAY** be required to wear a mask at all times (EXCEPT DURING THE RACE.) A nurse will be on hand to take temperatures. We will have hand sanitizer and extra masks available. We ask that Social Distancing be maintained and that you stay home if you don't or haven't felt well in the two weeks leading up to the event. All of our volunteers will be wearing masks and gloves. Cookies & hot dogs will be individually wrapped to go. Trophies will be sanitized and handed out quickly.

100% of Proceeds Directly Benefit Needy Children in the Belmont County School District During the Holidays

Mail form(s) and make check payable to:
Kidz Road Racing
808 North Chestnut St
Barnesville, OH 43713
Please Note: *This is a mailing address. The Race Address is:*
440 Watt Avenue

Male   **Female**
☐   ☐

Run   **Walk**
☐   ☐

Feel free to contact us for the Kids' Christmas Lists Wishes

Donations of items and gift cards will be accepted race day

_____
Name   (please PRINT clearly)

_____
Address

_____
City   State   ZIP

_____
Phone   Age on Race Day

_____
E-mail   **Today's Date ($21 after Thanksgiving)**

WAIVER: In submitting this entry, I, intending to be legally bound for myself, my heirs, executors and administrators, waive, release, and forever discharge any and all rights and claims which I may hereafter accrue against any event sponsors, event volunteers, event staff, and their officers, directors, agents, successors and/or assigns for any injuries suffered by me at this event while travelling to and from the event or while participating in it. I attest and verify that I am physically fit and sufficiently trained for competition of this event. I understand that I may be photographed and agree to allowing my photo, video, or film likeness to be used for any legitimate purpose by the aforementioned parties I acknowledge the contagious nature of COVID-19 and understand there is no guarantee that I will not become infected by participating at this event. I understand & accept the risk of exposure and/or infection and wish to participate in this event. I verify that I am not feeling ill and that I will practice Social Distancing

X_____
Signature Required (Parent/Guardian if under 18)   Date