

PI Day Trail Run Challenge

3.14 Mile Run to benefit local food banks

TIME: Registration at 9:00 AM / Race begins 10:00 AM
LOCATION: MCCTC, 7300 N Palmyra Rd, Canfield, OH 44406
DESCRIPTION OF COURSE: Pavement, grassy fields, muddy trails
ENTRY FEE: \$25 if received before March 18th
\$30 Day of Race - Cash or Checks Accepted



Register Online @ <http://www.runsignup.com>

T-Shirts guaranteed to all participants pre-registered by March 4th

AWARDS: 3.14 Race - Top Overall male and female; Winner in each age groups
AGE GROUPS: Male & Female - 10 & Under; 11-14; 15-19; 20-24; 25-29; 30-34; 35-39; 40-44; 45-49; 50-54; 55-59; 60 & Over

FREE PIE WILL BE GIVEN TO ANY RUNNER THAT FINISHES

MAKE CHECKS PAYABLE TO: MCCTC
ENTRIES SHOULD BE MAILED TO: 7300 N. Palmyra Rd Canfield Oh 44406 attn: Matt Putzier
FOR ADDITIONAL INFO CALL: Matt Putzier 330-729-4000 ext: 1505
OR E-MAIL: matthew.putzier@mahoningctc.com

PHOTOCOPIES OF THIS FORM ARE ALSO ACCEPTED---PLEASE PRINT CLEARLY

Gender: M F Age: _____
Name: _____ T-Shirt Size: S M L XL
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E Mail: _____

I know that running is a potentially hazardous activity. I should not enter or run this event unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, the conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release this race and all organizers, sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event. I also release any photos that may involve myself. Participant Signature Parent or Guardian:

Signature: _____ Date: ____/____/____

Parent/Guardian Signature (if under 18): _____

This race will be chip timed. Non return of chips will result in a fee of \$12