

# Wesbury 5K Chicken Run

## 5K Run/Walk and 1 Mile Walk

Co-Sponsor: Tony Petruso's Northwest Pharmacy Solutions



- Date:** Saturday, July 15, 2017  
**Location:** Wesbury - 31 N. Park Ave., Meadville, PA  
Parking available on campus  
**Time:** Registration begins at 8:15 a.m.  
Runners start at 9:00 a.m.  
Walkers start at 9:05 a.m.  
**Registration:** Please sign in at the registration tent the morning of the race to receive packet.  
Registration tent will be located at Northwest Pharmacy Solutions.  
**Entry Fee:** \$20.00 if pre-registered by July 1st (T-shirt included with Pre-Registration)  
\$25.00 after July 1st.

**Race will begin and end at Northwest Pharmacy Solutions (740 North Main St. Ext., Meadville)  
Award ceremony will be held after the 5K Run/Walk and 1 Mile Walk.**

\*There will also be a prize awarded for best costume.

**Register online at [www.smilemiles.com](http://www.smilemiles.com)**

For more information, go to [www.wesbury.com](http://www.wesbury.com), call 814-332-9022 or email [aferringer@wesbury.com](mailto:aferringer@wesbury.com)

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**Complete form and mail to: The Wesbury Foundation, 31 N. Park Ave., Meadville, PA 16335**

### Wesbury 5K Chicken Run Entry Form

Name \_\_\_\_\_  
Birth Date \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
T-Shirt Size \_\_\_\_\_  
Check One:  Runner 5K  Walker 5K  Walker 1 Mile  
Emergency Contact Name and Number \_\_\_\_\_  
Additional Donation Amount (Optional) \_\_\_\_\_

*Please make checks payable to The Wesbury Foundation. All proceeds benefit Wesbury's Benevolent Care Fund.*

#### **Waiver (MUST BE SIGNED)**

In consideration of your accepting this entry, I, the below signed, intend to be legally bound, for myself, my heirs, my executors and administrators, waive and release any and all rights and claims for damages I may have against the race, and sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will participate in this event as a footrace, that I am physically fit and sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeness, as well as any photographs and any record of this event in which I may appear for any legitimate purpose, including advertising and promotion.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Parent or Guardian if under 18 \_\_\_\_\_

**No refunds will be issued for any reason.**