

Prizes to top 3 males and females  
in each race!

Age division prizes for first place  
unduplicated

T-shirts for everyone  
pre-registered!



Registration will be at the YMCA or  
by mail anytime before Saturday,  
October 29, 2016. Race day  
registration will be at the  
EUM Church in Brookville.

Race will be using the  
beautiful Rails to Trails!

Thank you to all of our  
sponsors and to the Redbank  
Valley Rails to Trails for the use of the  
trail!

All proceeds go to the Brookville  
YMCA and Create

THANK YOU TO OUR SPONSORS:

Create

YMCA

Allegheny Valley Land Trust

Redbank Valley Trails Association

Second Annual

BROOKVILLE YMCA

and

CREATE

COLOR  
RUN!!!!



▶ YMCA COLOR  
RUN

Saturday,  
October 28, 2017  
10am/11am

**All races begin at the EUM Church in  
Brookville, PA.  
Half Marathon at 10 am  
All other races at 11 am  
For more information call Tina  
Householder at the Brookville YMCA at  
814-849-7355.  
Registration available online at  
[www.brookvilleyymca.com](http://www.brookvilleyymca.com)**

Brookville YMCA

I understand the description of these risks is not complete and that other unknown or unanticipated risks may result in injury, illness, or death. \_\_\_\_\_(initial.)

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In recognition of the inherent risks of the activity for which I and/or my children am responsible, will engage in, I confirm that I am/we are physically and mentally capable of participating in the activity and/or using equipment. I/we participate willingly and voluntarily and I assume responsibility for damages to or loss of my/our personal property. I also assume risk for accidents or injury caused during the race. I agree to follow all race rules. I assume the risk(s) of personal injury, accidents and/or illness, including but not limited to wounds, scrapes, abrasions and/or contusions, oxygen shortage, head, neck, and/or spinal injuries, shock, paralysis, and/or death.

COVENANT OF GOOD FAITH: I recognize that you, as provider of services, will operate under a covenant of good faith and fair dealing, but that you may find it necessary to refuse or terminate, the participation of any person you judge to be incapable of meeting the rigors or requirements of any activity. I accept your right to take such actions for the safety of myself and/or other participants.

AUTHORIZATION: I hereby authorize any medical treatment deemed necessary in the event of any injury or illness while participating in the activity. I either have appropriate insurance or, in its absence, agree to pay all costs of rescue and/or medical services as may be incurred on my/our behalf. I agree that any film or photographs of me/us, as participants, become property and may be used for promotional or commercial purposes.

RELEASE: In consideration of services provided, I, for myself and my children for whom I am parent, legal guardian or otherwise responsible, any heirs, personal representatives or assigns, do hereby release: Brookville YMCA, its principals, directors, officers, agents, employees, and volunteers, from all liability and waive any claim for damage arising from any cause whatsoever (except that which is the result of gross negligence).

**I have read and understood the foregoing acknowledgment of risks, assumption and responsibility, and release of liability. I understand that by signing this form I may be waiving valuable legal rights.**

PARTICIPANTS NAME (PRINTED): \_\_\_\_\_

AGE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_/\_\_\_/\_\_\_ PHONE:(\_\_\_\_\_)\_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

IF PARTICIPANT IS UNDER 18, THE PARENT OR LEGAL GUARDIAN MUST

ALSO SIGN: X \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE:(\_\_\_\_\_)\_\_\_\_\_ M/F: \_\_\_\_\_ AGE \_\_\_\_\_

SHIRT SIZE: YS YM YL AS AM AL AXL A2XLG

**(Please circle your choice)**

**Please indicate the event in which you will participate:**

**2 Mile \_\_\_\_\_**

**5K \_\_\_\_\_**

**10K \_\_\_\_\_**

**Half Marathon \_\_\_\_\_**

**Half Marathon begins at 10 am**

**All other races begin at 11 am**

**\*shirts size 2XLG or larger are an additional \$2 charge\***

**COST OF EVENT:**

**\$ 15 short sleeve**

**\$ 18 long sleeve**

**Checks made payable to the Brookville YMCA.**

**All racers registered**

**before October 19,**

**2017 will receive a**

**t-shirt.**

**RACE DAY FEE FOR**

**REGISTRATION IS**

**\$20 and shirts will be**

**limited.**