

# RUN FOR R.O.A.R.



## 5K Run/Walk

**Saturday, May 26, 2018**

**9 am start (Registration 8am-845am)**

**Race Location:** Starting line - Russell United Methodist Church

**Course Description:** Flat and Fast! Race will start on Main Street in front of the church and head out Old Route 62 to Woodland Drive. Take a left on Williams Street. Race will continue through the loop in Green Briar Circle and back.

**Awards:** Top three male and female. Top in each age group.

**Proceeds:** Benefit ROAR (Revitalization of Akeley and Russell – Pine Grove Township).

**Entry Cost information:** \$15 before May 1, 2018. \$20 after May 1, 2018. Guaranteed T-shirts to all entrants registered prior to May 1, 2018.

**Other Information:** Results by Miles of Smiles

**Make Checks to:** R.O.A.R. **Mail to:** PO Box 303, Russell, PA 16345

**Contact:** Antoinetta Lindell (814) 730-8785, email- [antoinettalindell@gmail.com](mailto:antoinettalindell@gmail.com).

**Website:** Race forms are also available online through the ROAR facebook page and Miles of Smiles.

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### **PLEASE PRINT LEGIBLY**

Name \_\_\_\_\_ Sex \_\_\_\_ Age \_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

SHIRT SIZE (circle One)    S    M    L    XL

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

In consideration of accepting this entry, I, the below signed, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release and any 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**