



## **Easterseals Centennial Run/Walk**

**10K, 5K and 2 Mile Walk**

**Saturday, August 31, 2019**

**10K and 5K @ 9:00 a.m.**

**2 Mile Walk @ 9:02 a.m.**

Proceeds from this event will help to support  
Easterseals Western and Central Pennsylvania  
Visit their web @: [www.easterseals.com/wcpenna/](http://www.easterseals.com/wcpenna/)

**Location:** Richard G Snyder YMCA  
1150 North Water Street  
Kittanning, PA 16201

**Course:** Out and back on the bike trail.

**Race Director:** Herb Cratty (724-841-6528) or [bonnherb@yahoo.com](mailto:bonnherb@yahoo.com)

**Awards:** 10K will receive hand carved finisher medals.

Age Groups for all 3 events

**Make Checks payable and send to:**

Miles of Smiles Timing Services  
511 Harpers Ferry Road  
Ellwood City, PA 16117

**Registration is also available at [RunSignup.com](http://RunSignup.com)**

Entry fee is per entrant. Please indicate which Race:

10K \_\_\_\_\_\$25.00      5K \_\_\_\_\_\$20.00      2 Mile \_\_\_\_\_\$20.00

Gender: M   F   Age \_\_\_\_\_

Tech Shirt please indicate which size:    S    M    L    XL

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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 road and traffic on 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: \_\_\_\_/\_\_\_\_/\_\_\_\_