



2024 St. Joseph's Liberty 5K Run/Walk



Race Date: Saturday, July 6 (Rain or shine)

Race Time: 8 AM

Where: Lucinda Train Station - 1040 Lander Drive, Lucinda PA 16235

Registration: Begins at 7:00 AM

Pre-Registration is strongly encouraged

Online registration: <https://runsignup.com/Race/PA/Lucinda/StJosephsLiberty5k>

Facebook @StJoesLiberty5K

Entry Fee: \$25 Preregistered (Postmarked by June 17th to guarantee a t-shirt - *No Show, No Shirt*) \$30 Race Day (T-shirts are on a first come, first serve basis- limited supply and sizes)

Running Awards: Top overall male and female finisher will receive a trophy. The top three male and female finishers in each age group will receive a medal: 14 and under, 15 – 19, 20 – 29, 30 – 39, 40 – 49, 50 – 59, 60-69, 70+

Starting Line: Lucinda Train Station (I-80 Exit 60, Rte 66 N for 10 miles to Lucinda, left on Maple Drive about ¼ mile

Parking: parking is available in field near the Lucinda Train Station or at St. Joseph's Church lot. If parking at St. Joseph's it is a short walk to Train Station

Course: This year's race will take place on the scenic Rail 66 Trail in Lucinda and will start at the top of the hill on Maple Drive, out and back the Rail 66 trail. This will be a fast 5K with an elevation loss. Great for a PR. - www.rail66.org

Electronic Timing: Timing will be provided by Miles of Smiles Timing Services. ****Results posted on smileymiles.com****

Last Name: _____ First Name: _____ Gender: M or F Race Day Age: _____

Street: _____ City: _____ State _____ Zip: _____

Phone: _____ Email Address: _____

Event entered: ___ 5K Run ___ 5K FUN Walk **T-shirt size:** YS YM YL AS AM AL AXL

Make checks payable to: **St. Joseph School** **Total Amount Enclosed:** _____

All entrants must complete a form and sign this release to participate. In consideration for accepting this entry and granting the right to participate in this event, I hereby agree for myself, my heirs, my executors, and administrators to waive any and all rights and any claims for losses and damages I may have against the sponsors, coordinating groups, and individuals associated with the event, their representatives, successors and assigns, and will hold them harmless for any and all injuries suffered in connection with the said event. I represent and affirm that I am in proper physical condition to participate in this event verified by a licensed physician and have sufficiently trained for the completion of this event. I give my permission for the free use of my name and picture in any broadcast, telecast or print media account of the event. I also hereby consent to permit emergency treatment in the event of injury or illness. I agree that should I fail to return my timing band; I will be responsible to reimburse St. Joseph School a \$35.00 replacement fee. The undersigned has read and voluntarily signed this release waiver.

Signature _____ Date _____

(Parent/Guardian must sign if participant is under 18 years of age)

Contact: Wendy Smail (814) 227-8047 or Kristie Schmader (814) 227-4049

Mail registration to: St. Joseph's Liberty 5K Run/Walk | 4785 Paint Mills Rd | Shippenville, PA 16254