



GREAT SHAMOKIN PATH 5K

April 10, 2010,
9am

LOCATION: Great Shamokin Path, NuMine, PA . Parking and start/finish in the NuMine ball field
Opposite side of Rt. 85 from DiMaio's grocery store

Sponsored by: Starfish, Leo, and Walking Clubs, Cross Country West Shamokin High School

Questions: Curt Mertz **Phone:** 724-783-7040 ext. 323

E-mail: merc@asd.k12.pa.us

AWARDS: Top 3 Male and Top 3 Female Overall Finishers

Age group <9, 10-12, 13-15, 16-18, 19-22, 23-29, 30-39, 40-49, 50-59, >60

Entry Fee: \$8.00 age 18 and under, \$15.00 age 19 and over (\$20.00 Race day registration)

Checks payable to: Great Shamokin Path 5K Run – Walk

Mail to: Sherry Shank, WSHS, 178 Wolf Drive, Rural Valley, PA 16249

Website: <http://www.asd.k12.pa.us/ws/site/default.asp>

Entry form: Great Shamokin Path 5K (return this portion)

Name _____ Male Female Age _____

Address _____ City _____

State _____ Zip _____ email _____

Phone # _____ Amount enclosed \$ _____ (check or money order)

Run (5K or 3.1 miles) **walk** (2 miles) **Shirt Size** S M L XL (register by March 31, 2010)

Waiver: By signature, I attest that I am physically fit and sufficiently trained to participate in this event. I have full knowledge of the risks involved. I further acknowledge that the race course contains uneven surface conditions and crosses a public road and I accept these risks. Therefore, in consideration of the acceptance of my entry, I for myself, my heirs, my executors, and administrators waive any and all rights and claims for damages I may have against the Armstrong School District, Cowanshannock Watershed Association, race sponsors, Cowanshannock township, and any individuals associated with this event and will hold them harmless for any and all injuries I may suffer in conjunction with this event. **I have read and understand this liability release**

Participant Signature _____ **Date** _____

(NOTE - Participants under the age of 18 require the signature of parent or guardian)

Parent Signature _____ **Date** _____