The 8th Annual Great Pumpkin Race

5K and 1 Mile Fun Run

Sunday, October 29, 2017 3:00 p.m.

St. Gregory School, Zelienople, PA

Come celebrate the fall season in the charming town of Zelienople. Enjoy great competition and lots of food, fun, music, and prizes during the party that follows. Costumes encouraged but not required. Proceeds benefit the St. Gregory School Parent-Teacher Organization and Athletics. Join us for a howling good time!!

Flat course
Chip timed by Miles of Smiles
Parking on-site in upper church lot or surrounding streets
T-shirt with GPR runnin' pumpkin logo for registrations prior to October 20th

Awards for 5K:
Top 3 Overall Male and Female
Top 3 Male and Female: 10 & under, 11-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

Awards for 1 Mile:
Top 3 Overall Male and Female
Top 3 Male and Female: 6 & under, 7-10, 11-14, 15-19
Top 2 Male and Female: 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

Last Name: _____ First Name: _____ Middle: _____
Street Address: _____ City: _____ Zip: _____
E-mail: _____ Phone: _____

Race: ☐5K ☐1 Mile
Age: _____ Gender: ☐Male ☐Female
Shirt size: ☐Youth S ☐Youth M ☐Youth L ☐S ☐M ☐L ☐XL ☐XXL

$20 per registration. $25 per registration after October 20, 2017. Checks payable to: St. Gregory Athletics.

Complete if registering as a family or team. $10 for each additional team member. Minimum team size: 3

Family/Team Name:				
Names (☐check if last name is the same as above registrant)	Age	Gender	Race (5K or 1 Mile)	Shirt size
Add more on back, if necessary.				

Return to school or parish office or mail to St. Gregory School: 115 Pine St. Zelienople, PA 16063 Attn: Great Pumpkin Race
May also register online at www.runsignup.com/Race/PA/Zelienople/8thAnnualGreatPumpkinRace

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director, RunSignUp.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees. I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition. In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver. Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

Signature of Participant (Parent/Guardian if under 18):_____ Date:_____