

NICK ADENHART 5K RUN AND WALK DETAILS

Race Day: Saturday June 11, 2011. Registration begins at 7:00a.m., kids 1k race begins at 8:30a.m, and 5K run/walk begins at 9:00a.m.. Registration will be located in pavilion #3 at Byron memorial Park, Williamsport, MD.

Adult Course: 5K run/walk begins and finishes at Byron Memorial Park, Williamsport, MD.

Rookie Race: 1K race for children 12yr old and under. Rookies pre-registered before race day will receive a t-shirt. Rookie Race begins at 8:30a.m.. Rookie Race will be timed and top 3 finishers in each age group winners will be awarded.

5K Awards: 1st Place-\$100, 2nd Place-\$75, 3rd Place-\$50, cash prizes for both men's and women's overall finishers. Top 3 finishers of each age group will receive medals.

T-Shirts: All pre-registered participants that are registered by May 31, 2011 are guaranteed a short-sleeve t-shirt.

5K run/walk Fee: \$20 before 5-31-11; \$25 after 5-31-11
Please make Checks payable to: H.F.S.A

Rookie Race Fee: \$10.00

Door Prizes: Will include Orioles baseball tickets & other items.

Questions/Contact: Mike Shifler 301-714-1121 e-mail: mshifler@foxassociatesinc.com

Brought to you by:

The Nick Adenhardt Foundation, Hagerstown Fairgrounds Softball Association, and The Washington County Recreation Department.

All proceeds will benefit the Nick Adenhardt Foundation & the Hagerstown Fairgrounds Softball Association.

THE NICK ADENHART 5K RUN AND WALK

2nd annual

Saturday, June 11, 2011
Hagerstown, MD

www.hagerstownfairgroundssoftball.com

THE NICK ADENHART 5K RUN AND WALK

REGISTRATION FORM

(Please detach and send in one form per person please)

PLEASE PRINT NEATLY

Registering For (Check one): 5k Run/Walk Rookie Race

First & Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Phone 2: () _____

E-mail: _____

Gender (m/f): _____ Date of Birth: ____/____/____ Age on Race Day: _____

T-shirt Size (Circle One) Y-Refers to Youth Sizes; A-Refers to Adult Sizes

Y-S Y-M Y-L A-S A-M A-L A-XL A-XXL

	Circle Age Group:				
	(under 6yr)	(6-9)	(10-12)		
Rookie Race					
5k Run/Walk	(20-29) (40-49)	(30-39) (50-59)	(13-15) (60-69)	(16-19) (70 & older)	(20-29) (30-39)

RELEASE & CONSENT FORM: In consideration of the acceptance of my entry/my child's entry, I for myself or my child, our executors, administrators, and assignees...do hereby release and discharge the organizers of this race and all other sponsors and organizers of all claims and damages, actions, whatsoever in any manner arising out of my/my child's participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event and I am, my child is physically fit and sufficiently trained to participate in this event. Further, I hereby grant full permission to any all of the foregoing use to use my/my child's name, photographs, videotapes, motion pictures, recordings or any other record of this event for any legitimate purpose without compensation or remunerations.

Athlete Signature: _____

(Parent/guardian signature if runner is under 18yrs of age)

Make Checks Payable to: H.F.S.A
DO NOT MAIL REGISTRATIONS AFTER 6/5/11
Detach and Mail Registration Form and Fee to
Michael H. Shifler
19139 Swinging Bridge Rd
Boonsboro, MD 21713

