

The Super Run 5K & 8K

Saturday, may 6, 2017, 8:00 a.m.
Lake Lanier, Martinsville, VA
To benefit Girls on the Run of Southern Virginia and
Martinsville STRIDE

When: Saturday, May 6, 2017 race begins at 8:00 a.m.

Where: Beautiful Lake Lanier (pre/post race festivities to be held at former Druid Hills School)

Registration: 5K-\$25.00 for Single Runners, 8K-\$30.00 for Single Runners until April 29th, price increases

by \$5.00 per category from April 30-Race Day No shirt guarantee after April 29th.

Includes: T-shirt, On-course Aid Station, Goody Bag, Finisher Awards for all, & post-race food!

Awards: Overall Male/Female Winners and Male/Female Age Groups for both the 5K & 8K

Packet Pick-up: Friday, May 5, 12-6:00 Martinsville YMCA or Race Day, 7:00 a.m. Druid Hills School

Please make checks payable to the **YMCA**. Registration forms can be mailed to the YMCA, 3 Starling Ave., Martinsville, VA 24112

Please complete and return with registration fee to either YMCA □ 5K (3.1 miles) □ 8K (4.97 miles) GOTR/STRIDE Team Association _____ First Name Address Age as of race day Male/Female (please circle) E-mail Address_____ Phone # Child's Name(s) (stroller division ONLY) T-Shirt Size (please check one) No shirt guarantee after April 29th __Youth XS __Youth S __Youth Med __Youth Lg _Adult S __Adult M __Adult LG __Adult XL __ Adult XXL Waiver: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in The Super Run 5K & 8K Event, and do hereby release Girls on the Run, STRIDE, the Family YMCA Inc., all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all rules for participation, and acknowledge that the event committee may refuse my entry at its discretion. I further grant permission for the YMCA/STRIDE/Girls on the Run to use any photographs, motion pictures or other recording of the event for legitimate purposes. I HAVE NOTED ANY MEDICAL CONDITIONS on the reverse side of this form. I verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in the event. Entry Signature:_ Date: Parent's Signature: (required of entrants under 18) Emergency Contact:___

Presented By:

the

Title Sponsors:

MARTINSVILLE BULLETIN



