



Shohola-Barryville Bridge 5K Run/Walk

Sponsored by Boy Scout Troop 76, Shohola, PA
In Conjunction With the Shohola Twp. Park and Recreation
Committee's *Pumpkins in the Park Festival*

Saturday, October 12, 2019, 9:30 a.m.
Rohman Park on Twin Lakes Rd, Shohola, PA
Race day registration and packet pick up starts at 8:30 a.m.

- "Kids' K" Fun Run
Start Time 11:00 a.m.
2 Age Groups (7 & under)(8-10)
- Top 3 Male and Female Overall Awards
- Age Group Awards
- Register With Form Below OR Online at www.Troop76Events.com
- Scenic Course Over the Shohola-Barryville Bridge!
- Professional Timing
- T-Shirts Guaranteed for All Pre-Registered Runners (No Shirts for "Kids' K")
- Proceeds Benefit Boy Scout Troop 76 and the Ecumenical Food Pantry in Milford, PA

Race Entry Registration Form

Please print clearly. One form per registrant. Postmark by 10/4/19. No refunds.

Name _____ ☐ Male ☐ Female Age on October 12, 2019 _____

Address _____

Phone _____ Email _____

<input type="checkbox"/> 5K Run/Walk	\$20.00 (pre-registered)	\$25.00 (day of race)	\$ _____
<input type="checkbox"/> "Kids' K"	\$5.00 (pre-registered and race day) NO SHIRT!		\$ _____
<input type="checkbox"/> Additional Donation to Boy Scout Troop 76			\$ _____
Total:			\$ _____

T-Shirt Size ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large

Liability and Waiver Release: In consideration of acceptance of the entry, I for myself, my heirs, personal representatives, and assigns, do hereby release the sponsors, race workers, and officials of this race from any and all liability arising from illness, injuries, or other damages I may suffer as a result of participation in such event. I affirm that I am physically able and have sufficiently trained for participating in the event and am aware that participation in this event could, in some circumstances, result in severe physical soreness and injury. I also give permission for the free use of my name and picture in any broadcast or written account of the event. I understand that my entry fee is NON-REFUNDABLE. Should race officials determine that completion of this event would be injurious to my health, I consent to being removed from the course and treated by the medical personnel in attendance or at their direction.

Signature of Participant _____ Date _____
Parent or Guardian (if under 18 yrs.)

Please make checks payable to *Boy Scout Troop 76*