



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL DEVELOPMENT

9TH ANNUAL ROCK-N-ROLL 5K SPONSORED BY WITHAM FAMILY YMCA

SATURDAY, SEPTEMBER 19, 2015 9:00AM START

REGISTRATION:

- \$25 if received by **September 7, 2015.**
- \$30 if received after **September 7, 2015.**
- **8:00am – 8:30am**, DAY OF RACE packet pickup and late entries at **Witham Family YMCA.**
- Don't feel like sending a hard copy form? **ONLINE Registration** is AVAILABLE THIS YEAR AS WELL at: <https://fs22.formsite.com/mainbinder/form1/index.html>

COURSE : This year's race will be held at the **Witham Family YMCA.**

The 5K course will be ran through:

-Paved Streets -Lebanon Neighborhoods -City Streets -Water WILL be provided

DIVISIONS: MEN/WOMEN: 17 & under, 18-29, 30-39, 40-49, 50-59, 60 & over

AWARDS:

- All runners/walkers registered by **September 7, 2015** will receive a souvenir "Rock-n-Roll" t-shirt (to be picked up at registration).
- There is **no guarantee** of t-shirt availability to those who register after **September 6.**
- Awards will be given out to the **first three finishers** in each division.

ADDITIONAL ENTRY FORMS: Can be found at:

-www.OurCauseisYou.org - www.Fiftiesfestival.com -Witham Family YMCA

OFFICIAL ENTRY FORM

Name: _____ Male: ___ Female: ___ Age: _____

Address: _____ City/State: _____ Zip: _____

D.O.B. ___ / ___ / ___ Phone #: _____

Email Address: _____ (to receive entry by email next year)

Runner: ___ Walker: ___ Shirt Size: (Adult) S M L XL XXL



WAIVER STATEMENT (must be signed): I know that running/walking a road race is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decision of race officials relative to my ability to safely complete the race. I assume all risks associated with running/walking in this event including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and conditions of the road, all such risks being known and appreciated by me. **HAVING READ THIS WAIVER** and knowing the facts and consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the organizers and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of my negligence or carelessness on the part of persons named in this waiver. I grant permission to all of the organizers/ sponsors of this event to use any photograph, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that bicycles, skateboards, roller skates or blades, animals and radio headsets are not allowed in the race and I will abide by this guideline.

Signature: _____ Date: _____

Parent's Signature (if under 18 years of age): _____

Mailing Address:

Witham Family YMCA
Michael Ainbinder
2791 N. Lebanon St. Lebanon, IN 46052

