



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL DEVELOPMENT

2nd ANNUAL ROCK-n-ROLL KIDS FUN RUN SPONSORED BY WITHAM FAMILY YMCA

SATURDAY, SEPTEMBER 19, 2015 10:00AM

REGISTRATION:

- \$7 if received by **September 7, 2015**.
- \$10 if received after **September 7, 2015**.
- **8:00am – 9:00am**, 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 **3/4 miles** long around:

-Paved Streets -Witham Health Services -Water WILL be provided

DIVISIONS: Kids 10 and under, Kids 5 & Under (Parents are welcome to run/walk with their child)

AWARDS: All children registered by **September 7, 2015** will receive a finishers medal!

ADDITIONAL ENTRY FORMS: Can be found at:

[-www.fiftiesfestival.com](http://www.fiftiesfestival.com) [-www.OurCausesYou.org](http://www.OurCausesYou.org) **-Witham Family YMCA**

ANY QUESTIONS: Call Michael Ainbinder at **765-535-7920** or email mainbinder@indymca.org.

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 : YS YM YL AS AM

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 (required): _____

Mailing Address:

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

