

# Wenonah's Fun & Fitness 5K

## Sunday June 11, 2017

Registration begins at 8:00am

Children's Fun Run 1K starts at 9:00am, non-competitive, 12 and under

Run/Walk 5K begins at 9:30am, all ages

**Course:** The race will start and finish at Wenonah Elementary School in Lake Grove. The course runs through the surrounding neighborhood.

**Registration:** \$20 Adults – includes Race T-shirt **before May 10, 2017**

\$10 Kids – includes Race T-shirt **before May 10, 2017**

Race Day Registrations - \$25 adult/\$15 kid - **T-shirts cannot be guaranteed**

**Check-in:** Wenonah Elementary School starting at 8:00am.

**Awards:** Trophies for the first overall male/female. All children who participate in the Fun Run will receive medals.

Trophies for top runner in each division: 11 & under, 12-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70+, Wenonah Alumni, and Sachem Employee.

**Timing by [www.justfinish.net](http://www.justfinish.net)**

**Race Coordinator:** Heather Morreale (631)-588-3103

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### Registration Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Age on Race Day: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Check one: \_\_\_\_\_ 5K Run/Walk \_\_\_\_\_ Kids Fun Run \_\_\_\_\_ Wenonah Alumni \_\_\_\_\_ Sachem Employee

T-shirt Size (circle one): **Adult:** S M L XL XXL **Youth:** S M L XL

Amount Paid: \$ \_\_\_\_\_ (please make check payable to Wenonah PTA)

Send completed application into school with your child or mail to: Wenonah Elementary School 251 Hudson Ave. Lake Grove, NY 11755

Waiver: \_\_\_\_\_ (name of participant) does hereby covenant and agree to release and hold harmless the Sachem School District from and against any and all liability, loss, damages, claims or actions (including costs of attorney fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of participation in the Wenonah Fun & Fitness 5K.

I understand participation in the Wenonah Fun & Fitness 5K involves rigorous physical activity and risks of physical injury, and I assume these risks. I hereby give consent for emergency transportation and treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation or treatment on behalf of the participant. I further certify that I am in good physical condition, and I have no medical or physical conditions that would restrict his/her participation in this event.

If signed by a parent/guardian, the parent/guardian agrees to release and hold the above named organizations and persons harmless of any claims which may be asserted by or on behalf of the entrant. I have read the above statements, understand them, and my signature below confirms its full acceptance.

\_\_\_\_\_ Date \_\_\_\_\_

Participant's Signature

Print Name

\_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18 years of age)