

Abuse & Rape Crisis Center/YMCA 5K Shamrock Run/Walk Registration Form

March 24, 2018

Run/Walk begins at 10 am; Registration 9 - 9:45 am

Name: _____

Address: _____
Street/PO Box Town/City State & Zip

Telephone: (____) _____ Email address: _____

5K Run _____ 5K Walk _____ Virtual _____ Male _____ Female _____ Age _____

Shirt Size: S _____ M _____ L _____ XL _____

Team Name: _____

In signing this entry, I, for myself, my heirs, lawyers, executors, and administrators, waive and release any and all the sponsors and administrators of the ARCC/YMCA Shamrock 5K Run/Walk of any and all liability for personal injury that I may incur. I hereby certify that I am physically fit and have properly trained for this event. Signing this entry constitutes permission to use photos taken at this event for future publicity purposes.

Participant Signature

Date

Applicants under the age of 18 must have parent permission to participate in this event.

Parent Signature

Date

Registration fee: **\$20 pre-registration.** Pre-register as a group of 5 or more at the same time and discount individual registration fees to \$15/person (pre-registration only). Return pre-registration forms and fees by March 19, 2018 to: **ARCC, PO Box 186, Towanda, PA 18848.** Make checks payable to **ARCC** or **Abuse & Rape Crisis Center.** Registrations may be dropped off at the YMCA through March 19. **The registration fee after March 19, 2018 is \$25. Registrations will be accepted race day at \$25/person.**

Please help us to raise more funds by gathering sponsors for your run/walk. Sponsorship form may be turned in on race day (if pre-registering, please note on your registration form that you are collecting sponsorships).

The staging area for the run/walk is Towanda YMCA at 9 College Ave. Registration will be open from 9 am to 9:45 am at the staging area. Award ceremony will be held at 11 am at the staging area.

ARCC exists to end interpersonal violence. The Y's mission is to put Christian principles into practice through

programs that build a healthy spirit, mind and body for all.

ARCC/YMCA 5K Run/Walk

5K Run/Walk Sponsorship Form

Participant Information

Name: _____

Address: _____

Phone: _____

I will be participating in the ARCC/YMCA 5K on Saturday, March 24th, 2018. This event is held to help fund ARCC's work toward ending domestic and sexual violence and the YMCA to ensure child development, healthy living and social responsibility throughout Bradford County PA.

Sponsor	Address	Phone	Amount	Check or Cash
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TOTAL AMOUNT OF SPONSORSHIPS				

Raise \$40 or more in sponsorships and your entry fee is waived and you get a prize!