

RAIN OR
SHINE
THE
RACE IS
ON!

CACY Drug Free 5K Run/Walk

Proceeds support drug and alcohol prevention in Richland County

Date: Saturday—June 7th , 2014

Time: 9:00 am

Running Age Groups

Male/Female:

- 15-under
- 16-19
- 20-29
- 30-39
- 40-49
- 50-59
- 60+

Location: Lexington Senior Civic Center
67 E. Main St.
Lexington, Ohio 44904
(Event will be held on the bike trail)

Pre-register by: Friday - May 23rd , 2014
T-shirts provided to the first 80 participants

Online Registration and Results at:
www.ohioraceday.com

Non-Refundable Entry Fees:
•\$20.00 Pre-Register by 5/23/14
•\$25.00 Race Day Fee



TROPHY GIVEN TO:

Top Overall Male/Female

Race Day Registration: 7:45 am-8:45 am
5K Run/Walk Race Start Time: 9:00 am
Awards Ceremony: 10:00 am

MEDALS GIVEN TO:

1st, 2nd and 3rd place in each age group



For more information call:
419-774-5683 or

E-mail
funkt@cacyohio.com

Check out our website at:
www.cacyohio.org

Entry fee must be check or money order. Mail form and entry fee payable to:

CACY
1495 W. Longview Ave. Ste. 104
Mansfield, Ohio 44906

Please circle which category:

Runner Walker

Name _____
Address _____
City/State/Zip _____
Phone _____
E-mail Address _____
Gender _____ Age on race day _____

T-shirt size: S M L XL XXL

I want to provide additional support in the amount of:

\$5 \$10 \$15 \$25 \$ _____

Waiver of Liability: In consideration of inclusion as a participant in the 2014 CACY Charity Run, participant agrees to indemnify and hold harmless CACY, CACY Board of Trustees, members, agents, employees, Ohio Race Day, LLC and assigns from and against any liability, loss, costs, demand, claims, fines, debts, or judgments that participant or participants members, performers, employees, agents, independent contractors, or volunteers may sustain or incur as a result of or arising from participant's involvement in the charity Run. Such indemnification will include all reasonable attorney and legal fees.

In addition, CACY has made no representations, promises or guarantees regarding condition, safety or suitability of any location or equipment provided for any purpose or use of any kind. Participant will participate at own risk.

By signing this waiver of liability, I the undersigned, agree that I have read and understand all of the foregoing. I certify that I am physically fit & have sufficiently prepared myself for this event.

Signature _____ Date _____

Signature of parent or guardian if under 18 years of age. _____ Date _____