

Lifesaver 5K / 10K Run / Walk

Richland County Lions Clubs Fundraiser for Project Lifesaver

Saturday, December 09, 2023



Located near Mansfield, Charles Mill is a quiet place to relax and enjoy nature. The Park entrance is 1277 State Route 430, Mansfield OH 44903 (located near the junction of State Routes 430 and 603).

Proceeds go to buy "locater devices" for Individuals with Alzheimer's/Dementia/Autism/Down Syndrome

Course: Once around the beautiful peninsula park for the 5K, twice around for the 10K

8:00 AM Race Day registration **\$25**
Early registration **\$20**, T-shirt guaranteed if received by Dec 1st, no refunds

9:00 AM 5K / 10K Run / Walk

Awards: Top overall male and female and first place male and female in each age group
14 & under / 15-19 / 20-29 / 30-39 / 40-49 / 50-59 / 60-69 / 70 +

More info: Email Chris at berrier28@hotmail.com or call Gene at 419-565-4300

- Online registration and course map at www.ohioraceday.com (fees apply) ...or send one registration form for each participant and mailing registrations to: Chris Berrier, 774 Hoover Road, Mansfield OH 44905
- Make checks payable to: Richland County Lifesaver Race

First Name: _____ **Last Name:** _____

Gender: M F **Age on Race Day:** _____ **Event (circle one)** 5K 10K (no walkers)

E-mail: _____ **T-Shirt:** S M L XL XXL



Address:

City/State:

Zip:

Phone #:

I want to provide additional support in the amount of \$25 \$50 \$75 \$100 \$ _____

Waiver and Release

In consideration of the acceptance of the entry, I waive for myself and my heirs and all claims for damages against the sponsors of the Charles Mill Save a Life Event and their representatives and all race officials and volunteers for injuries received during and as a result of this event. If I should suffer injury or illness, I authorize officials at the race to use their discretion to have me treated and be transported to a medical facility and I take full responsibility for this action. I certify that I am physically fit and sufficiently prepared myself for this event.

Participant signature (or parent / guardian if under 18) _____ **Date** _____



Find us on Facebook at Richland County Project Lifesaver