

2ND ANNUAL LUNG CANCER RUN/WALK

AT WASHINGTON CROSSING HISTORIC PARK

PRESENTED BY ARIA JEFFERSON HEALTH

Sunday, October 9, 2016 – 5k/10k start at 9:00 AM

Washington Crossing, PA

LOCATION/REGISTRATION: Starts at The Greene Pavilion in Washington Crossing Historic Park, 1112 River Road, Washington Crossing, PA 18977; Registration/number pickup at The Greene Pavilion, starting at 8:00 AM.

RACE TIMES: 5k/10k at 9:00 AM, Kids Fun Run – 100 Meter Dash at 10:15 AM

COURSE: wheel measured course. The 5k and 10k course run from Washington Crossing Historic Park along the towpath in Delaware Canal State Park and back.

AMENITIES: T-shirt to all pre-registrants of 10k/5k guaranteed if registered by Sept 23rd afterwards and including race day, while supplies last; Refreshments for finishers, toilet facilities, onsite parking, Chip Timing by Pretzel City Sports, and instant results. Held rain or shine. No refunds. Results on www.pretzelcitysports.com in 1-2 days.

AWARDS: Awards for the 1st place male & female for 5k and 10k; Rewards mailed within 7 business days.

ENTRY: For 5k/10k/Kids Fun Run: \$25 if postmarked by September 23, 2016. Guarantees shirt in size selected. Afterwards and including day of race \$30, shirts available while supplies last; \$25 when they're gone. Lung Cancer Survivors and Kids 8 and Under are free for all events. Shirts not included for kids 8 & under.

Online registration available at http://pretzelcitysports.com/online_registrations.html (Nominal service fee applies, closes at midnight, the Wed before race day)

GENERAL DIRECTIONS FOR ALL: Take I-95 to Exit 51 (New Hope). At the bottom of the off ramp, make a left onto Taylorsville Road and drive three miles to the second stop light (Rt. 532). Make a right onto Rt. 532 and proceed to the four-way stop sign. Make a left onto Rt. 32 (River Road). The visitor's center will be on your right. Parking is on your left.

MAKE CHECK PAYABLE TO : Lung Cancer Run

MAIL CHECK & FORM BELOW TO: Lung Cancer Run, 3998 Red Lion Road, Suite 214, Philadelphia, PA 19114

RACE DIRECTOR: Teresa Mallon 215-452-6451 (call or text), teresamallon@ariahealth.org

.....Please Print Clearly.....

Last Name _____ First Name _____

Address _____ City/State _____ Zip _____

Race day age: _____ Date of birth ___/___/___ Are you a Lung Cancer Survivor? Yes / No

Race (circle one): 5k 10k KIDS Fun Run Sex: M F Phone: (____) _____ A.M. or P.M.??

Shirt Size (circle one): Youth L Adult S M L XL XXL email _____

Already Getting Emails from Pretzel City Sports Regularly?? _____ Yes _____ No

WAIVER: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that there will be traffic on the course and assume the risk for running in traffic. I also assume any or all other risks associated with running or attending the race including but not limited to falls, contact with other participants, the affects of the weather and the condition of the roads, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge Pretzel City Sports, Aria Jefferson Health and any subcontractors it utilizes, all municipalities in which the race is held, the race committee, volunteers, any and all sponsors including their agents, employees, assigns or anyone acting for on their behalf, or anyone else associated in any way with the race, from any or all claims or liability for death, personal injury or property damage of any kind of nature what so ever arising out of, or in the course of, my participation in this event(s). This waiver extends to all claims of every kind or nature what so ever, foreseen or unforeseen, known or unknown. I HAVE READ AND UNDERSTAND THIS WAIVER: (if under 18, legal guardian must sign)

Signature _____ Date _____/_____/ 2016