

I RUN FOR FOOD

Help Stomp out Hunger in Bucks County
Sunday June 5th, 2016-5K/10k and 1 mile Fun Run/Walk
FLAT, FAST COURSE

WHO: Runners of all ages, Gather family, friends and coworkers. Walkers will participate on the same course.

HOW: Make Check to Shir Ami- Run For Food and mail:
I Run For Food
PO Box 632, Newtown, PA 18940

WHAT: Choose certified 1 mile, 5K, 10k

Or register online at :
www.pretzlecitysports.com
www.wrightstownhelathandfitness.com

WHERE: Washington Crossing State Park
General Greene Pavillion
 Route 532 and Rt 232
 Washington Crossing, PA 18977

RESULTS/AWARDS: Marked course. Finish line and timing service by Pretzel City Sports. Race results posted on site within 2 days at www.pretzlecitysports.com

WHEN: Sunday, June 5th, 2016
 7:30 am – Registration Opens
 9:00 am – 5K, 10K
 and 1 Mile Fun Run/Walk Begins
 10:30am – Award Presentation

Custom tile award will be presented to:
 Top 3 Male Runners (5K and 10K)
 Top 3 Female Runners, (5K and 10K)
 Top 3 Male Youth Runners (5K and 10K)
 Top 3 Female Youth Runners (5K and 10K)
All registrants of the 5K, 10K and 1 mile fun run/walk (who registered by 5/23) will receive a T-shirt

WHY: Help to Stomp out Hunger by participating in this fundraiser benefitting local food pantries in Bucks County including the Shir Ami and Penndel Food Pantries.

Proudly sponsored by:



REGISTRATION: Detach and complete this portion and mail to **P.O. Box 632 Newtown, PA 18940** by May 23rd. or register online at www.pretzlecitysports.com; qwww.wrightstownhealthandfitness.com by May 23rd Online registration ends the Wednesday before raceday. **Day of registration is also available for \$5.00 more per person/per event.**

Participants registered by May 23rd are guaranteed to receive a custom event shirt, After May 23rd it is based on availability.

Event:	Adult	5K _____	\$25.00	10K _____	\$25.00
	Youth (5-12 yrs. Old)	5K _____	\$20.00	10K _____	\$20.00
	1 Mile Fun Run/Walk	_____	\$20.00		
	Additional Donation	_____		TOTAL ENCLOSED	_____

Name _____

Address _____

City _____ State _____ Zip _____ Phone _____

E-mail address _____ Age (on Race Day) _____ Male _____ Female _____

T-shirt size (circle one)
Youth L
Adult S M L XL XXL

Waiver: I know that running in a foot race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any and all decisions of a race official relative to my ability to safely complete the run. I assume all risks associated with running participants, the effects of weather, including high heat and humidity or extreme cold, traffic and conditions of the roads and trail, all such risks being known and appreciated by me. In consideration of granting the undersigned permission; having read this waiver, I, for myself and anyone entitled to act on my behalf, waive, release and forever discharge Shir Ami, Commonwealth of Pennsylvania DCNR, Pretzel City Sports., Washington Crossing Historic Park, Pennsylvania Historical and Museum Commission, Upper Makefield Township, Solebury Township, their officers, directors, employees, sponsors, their representatives and successors and volunteers from all claims or liabilities of any kind arising out of my participation in this event. I further grant permission to all the foregoing groups to use any photographs, motion pictures, recordings or other record of this event for any legitimate purpose, without compensation.

Signature X _____ Date _____
(Parent or guardian's signature if less than 18 years of age.)