



Laney's Legacy of Hope presents:

Laney's 7th Annual *Fashionista 5K*

Sunday, April 26th 2020 | 9:00 am West Reading, Pa

LOCATION: Park at Reading Hospital's 7th Ave. parking garage and follow signs to start line in Masonic Parking entrance. **This event is rain or shine.**

CAUSE: To help raise awareness & funds for Laney's Legacy of Hope, taking action against pediatric cancer.

COURSE: Weave through the nearby park system in the lovely town of West Reading starting and ending at & Masonic Parking Lot.

AWARDS: Awards for the male & female winners **7-9** 3M, 3F **10-13** 3M, 3F **14-18:** 3M, 3F **19 - 29:** 3M, 3F **30-39:** 3M, 3F **40-49:** 3M, 3F **50-59:** 3M, 3F **60+:** 3M, 3F.

BEST DRESSED AWARDS: 1 Adult Female, 1 Adult Male, 1 Male under 12, and 1 female under 12

REGISTRATION: By April 4th \$25 with guaranteed T-shirt and swag bag; **After April 4th: \$35 with no guarantee of T-shirt or swag bag;**

Mail-in registrations must be postmarked by April 4th to receive t-shirt & swag bag. Day of registration fee will be: \$35, T-shirt & swag bag if available, and no guarantee.

RACE PACKETS Early pickups available Friday April 24th 11-5pm and Saturday April 25th 10am -12pm at **Keys 2 Fitness 1311 Penn Ave.**

Wyomissing OR day of race from 7:30-8:30 in Masonic parking lot.

AMENITIES: Porta-pots at start and finish, food & drink at finish for runners, face painting, carnival games, and music while onlookers wait for the race to finish.

DIRECTIONS FROM NORTH OF READING: Take 222 South, follow to 422 east, and take Penn Ave exit. Proceed on Penn Ave, take left onto 7th Ave., parking garage will be three blocks down on the right.

DIRECTIONS FROM SOUTH OF READING: Take 422 west, takes Penn Ave exit. Proceed on Penn Ave, take left onto 7th Ave., parking garage will be three blocks down on the right

Optional online registration available at

<http://laneylegacyofhope.org/laney-fashionista-5k-2020>

(Nominal service fee applies; online registration closes midnight, Monday April 20th.

Mail in forms need to be post marked April 20th)

MAIL FORM & CHECK PAYABLE TO "Laney's Legacy of Hope" to

P. O. Box 5861 Wyomissing, Pa 19610

LANEY'S LEGACY OF HOPE: Race Director Jenell Wolf | 610.763.0776 | jwolf@laneylegacyofhope.org

LAST NAME _____ FIRST NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Sex: M F RACE DAY AGE: _____ DATE OF BIRTH: ____ / ____ / ____ PHONE: (____) _____ - _____

SHIRT SIZE (CIRCLE ONE): S M L XL KIDS: M L

EMAIL (PRINT CLEARLY): _____

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 effects 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, Laney's Legacy of Hope 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. By entering this race, I am granting permission to pretzel city sports and Laney's Legacy of Hope to use any pictures or likenesses of me secured at the event in any way they see fit without review, restriction or compensation. **I HAVE READ AND UNDERSTAND THIS WAIVER (if under 18, legal guardian must sign):**

SIGNATURE _____ DATE ____ / ____ / ____