INTERCOURSE LIBRARY FALL 5K RUN/WALK

READERS BECOME LEADERS

Saturday, October 3rd, 2026

WHO: Runners of all ages. Walkers are also invited to participate using the same course. The course is stroller friendly.

WHAT: Intercourse Library & Pretzel City 5K is a fund raiser to support the library.

WHERE: Intercourse, PA. The course will begin at the library Center St. to Queen Street, to Harvest Drive, to Belmont Road, to West Pequea Lane back to Queen ending at the library.

WHEN: Saturday, October 3rd, 2026
8:30 a.m. – Registration begins
9:30 a.m.– 5K Run begins
Award presentation at finish line immediately following the race

DIRECTIONS:
- Intercourse Library 31 Center Street, Intercourse, PA 17534
- Registration, starting line and family activities behind the library
- Parking behind the library

Start Time 9:30AM

QUESTIONS: Call the library 717-768-3160 or email askus@intercourselibrary.org.

HOW: Complete the form below and submit appropriate amount.
5k Entry Fee: Register by September 7, 2026, for the reduced fee of $40 and a race drawstring bag, after September 7, 2026 including race day fee is $45. Drawstring bags available for purchase while supplies last.

Optional Online Registration Available at
https://www.pretzelcitysports.com/online-registration/
(Nominal service fee applies, closes midnight, Wed. of race week)

5k AWARDS: Medals will be presented to 1st, 2nd & 3rd place overall Male and Female runners. 1st, 2nd & 3rd place medals presented in the following categories under 10 years old; 10- 14 years; 15-19 years, 20-29 years, 30-39 years, 40-49 years, 50-59 years, 60-69 years, 70+ years.

RESULTS: Race Results will be announced at the finish line and posted on www.pretzelcitysports.com.
Finish line and timing service by Pretzel City Sports.

REGISTRATION: Intercourse Library Fall 5k Run/Walk Complete this portion. Detach and mail. Include $40 early registration fee by September 7, 2026. Late registration fee $45. Checks payable to Intercourse Library.

Name_____ Address_____
Please print
City _____ State_____ Zip _____Age *(on Race Day)*_____

Gender: Male Female **Event** (circle one): 5k RUNNER 5k WALKER

Phone_____ E-mail address_____

WAIVER/RELEASE: I hereby waive all claims against the race director, race officials and volunteers, any and all sponsors including, but not limited to Intercourse Library, the Boroughs of Intercourse, the Townships of Leacock and those in their employ, the Counties of Lancaster, and all their representatives and successors from any injury or liability I might suffer in this event. I attest that I am physically fit and prepared for this event. I assume all risks associated with running in this event including but not limited to: falls; contact with other participants; the effects of the weather, including high heat and/or humidity; and the condition of the road; all such risks being known and appreciated by me. I grant full permission for organizers to use my name and or pictures in legitimate accounts and promotions of this event.

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

Please make checks payable to Intercourse Library and mail to: Intercourse Library PO Box 617, Intercourse, PA 17534