



# Smith's Challenge Trail Run

## 5 mile/10 mile Trail Race June 15<sup>th</sup> 9:00 AM

Located at beautiful Lancaster County Central Park Pavilion #2 | Benefits the Lancaster Road Runners Club

<b>Registration:</b> Register by May 23rd to receive a shirt - 5 Mile: \$30 10 Mile: \$35 Register by June 13th with no guarantee of shirt- 5 Mile: \$30 10 Mile: \$35 Day of Registration - 5 Mile: \$35 10 Mile: \$40	<b>Awards:</b> Awards will be given to overall top male and female for each race. Random prize drawings for racers will be picked after completion of the race.
<b>Course:</b> There are 5 or 10 mile options available. 10 mile runners will run the same 5 mile course twice. 5 mile runners will run clockwise, 10 mile runners counter-clockwise	<b>Contact:</b> Race Director: Olek Kerod Website: <a href="http://www.LRRCLUB.org">www.LRRCLUB.org</a> <a href="mailto:olek.kerod@yahoo.com">olek.kerod@yahoo.com</a> 717-799-4364
Drinks/snacks will be provided for registered finishers. Water stop will be available at midway point of the course.	

ENTRY FORM	Release
Name _____ Address _____ City _____ State _____ Zip Code _____ Date of Birth _____ Race Day Age _____ <input type="checkbox"/> M <input type="checkbox"/> F Email Address _____ <input type="checkbox"/> 5 mile <input type="checkbox"/> 10 mile Shirt Size*: XS S M L XL XXL (circle one) Return form with a check for \$30 for 5 mile or \$35 for 10 mile before June 13 <sup>th</sup> made payable to: Lancaster Road Runners Club Address: PO Box 7172, Lancaster, PA 17601	Release: In consideration of the acceptance of this entry, I the undersigned intending to be legally bound hereby, for myself, my heirs, executors, administrators, and personal representatives, hereby waive and release any and all rights and claims for damages, illness, injuries, or losses which I have or which may accrue to me against all race officials and all organizations constructing or involved in this event, included but not limited to, Lancaster Road Runners Club, Lancaster County Central Park, West Lampeter Township, and Lancaster Township, their respective officers directors, employees, representatives successors, assigns, and sponsors, that may result from my participation in this event. Further, I hereby grant full permission to the aforementioned persons and organizations to use my name and/or picture in any newspaper, photograph, video tape, motion picture, recording or any other account of this event for any purpose whatsoever. I understand the entry fee is non-refundable in the event that the race is cancelled due to dangerous conditions or weather, and this decision is made by the race director.  Date _____ Signature _____

\*Shirts are gendered. Specify shirt gender if it does not match gender selected above.

