

Greene County Road to Recovery

2nd Annual 5K

Saturday, September 22, 2018

Registration 8:30-9:30 a.m.

Race begins at 9:30 a.m.

Awards at 10:30 a.m.



Race begins and ends at Shawnee Park on N. Park Drive in Xenia, OH

- Large 3.1 mile loop in a residential setting
- Chip timing by Speedy-Feet
- Traffic restricted during race
- Refreshments at the finish line
- Strollers and dogs welcome!

Top overall male and female

1st, 2nd and 3rd place in each age group:

- 18 and under
- 19-29
- 30-39
- 40-49
- 50-59
- 60 and over

Two ways to register!

1. Mail this registration form and payment
2. Register & pay online at www.speedy-feet.com

Packet pick up 8:30-9:30a.m. on Saturday September 22 at Shawnee Park

Mail form and entry fee to:

Women's Recovery Center Phone: 937-562-2400
515 Martin Drive Fax: 937-562-2430
Xenia, OH 45385 Email: info@recoverycentersinc.org

Checks payable to: Greene County Community Foundation
Memo line: GC Road to Recovery

Name _____

T-shirt size:

XS S M

L XL

Address _____

2XL 3XL 4XL

City, State, Zip _____

For more information call: 937-562-2400
Registration and post race results available on
www.speedy-feet.com

___ \$20 Preregistration (t-shirt guaranteed)

___ \$25 Registration after 09/05/18

___ I am unable to attend but would like to donate

RELEASE: In consideration of the acceptance of my entry, I for myself, my executors, administrators and assignees, do hereby release and discharge all sponsors and individuals assisting in the presentation of the Greene County Road to Recovery 5K for all claims of damages, demands and actions whatsoever in any manner arising or growing out of my participation in this event. This includes the race director, sponsors, promoters, and volunteers. I attest and verify that I have full knowledge of the risk involved in this event and I am physically fit and sufficiently prepared to participate in the event. **Anyone under 18 must have a guardian present during the event**

Signature _____ Date _____

Phone _____ Sex _____ Age _____ Signature of parent or guardian if under 18 _____ Date _____