



Clinton County Healthy Hometown 3rd Annual



Family Fun Run & 5K RUN FOR THE ROSES



Saturday, May 7, 2016 • Mt. View Park Albany, KY

Registration Begins at 7:00 AM ⌘ Registration fee \$10.00 ⌘ 5K Begins at 8:30 AM
 1K Family Fun Run Starting Times Will Be Staggered → Ages 3—5: 10:00 AM ☉ Ages 6—9: 10:03 AM
 Ages 10—13: 10:06 AM ☉ Ages 14—17: 10:09 AM ☉ Ages 18+: 10:12 AM

Make checks payable to Healthy Hometown Activity Fund

(Proceeds will be used toward the purchase of playground equipment for Mt. View Park.)

T-shirts will be awarded to each participant.



KIDS RUN FREE!!!



1K Family Fun Run / Walk

- Will begin & end on the walking track at Mt. View Park.
- Medallions for all kids who participate.
- Check with your teachers about incentives for participating!

5K Run for the Roses

- Starts at entrance to Mt. View Park.
- Roses for the first 25 runners who cross the finish line.
- Trophies for the 1st, 2nd, & 3rd place winners in each category.

To pre-register, complete the form below & return to:

Amanda Cross @ ECC Regina Parrigin @ AES Barb McWhorter @ CCMS Gina Poore @ CCHS

April Speck @ Clinton County Welcome Center OR Mail to: April Speck 28 Welcome Center Drive Albany, KY 42602

For more information, contact Healthy Hometown Coordinator April Speck at (606) 387—2051 or april.speck@clinton.kyschools.us.

REGISTRATION DEADLINE IS APRIL 18TH TO ENSURE CORRECT SHIRT SIZE.

| ***Please Circle Participation Category: | | 1K Family Fun Run / Walk | | | 5K Run for the Roses | | | | | | | |
|--|--|--------------------------|------------|-------|----------------------|-----------------------|-------|---------|-------|-------|-------|------|
| Name: | | | Grade: | | | Teacher: | | | | | | |
| Street Address: | | | | | | | | | | | | |
| City, State ZIP: | | | | | | | | | | | | |
| Phone: | | | | | Email Address: | | | | | | | |
| Age: | | DOB: | | | Male: | | | Female: | | | | |
| T-Shirt Size (Youth): | | | S | M | L | T-Shirt Size (Adult): | | | S | M | L | XL |
| Circle Age Division → | | | 10 & under | 11—13 | 14—16 | 17—19 | 20—29 | 30—39 | 40—49 | 50—59 | 60—69 | 70 + |
| Special Medical Information: | | | | | | | | | | | | |

RELEASE OF RESPONSIBILITY

In consideration of accepting my entry, I, my child, intending to be legally bound, do hereby for myself, my heirs, my executors and administrators, do waive and release forever any and all rights and claims for damages I may accrue against all persons and agencies, namely the Clinton County Healthy Hometown Coalition of Albany, KY and / or all of its agents involved with taking part in any activities connected with the event. I also release publications of rights to photographs of me shot during the 1K / 5K for the purpose of publicity in future races. I further state that I am in proper physical condition to participate in this event. Runners must register and run under their proper names, sex, and age division to avoid disqualification.

Signature of Participant

Signature of Parent/Guardian

Date