

TURTLE TROT 10K and 10K relay

Saturday July 14, 2018

Walk 7:30am Run 8:00am

Start/Finish: Kenoza Lake Fire House

Entry Fee: \$25 by June 30th and \$30 on race day

Checks Payable to: CFOS Doug Ackermann and Brenna Darling Memorial Fund

Mail to: April Ackermann 322 Mueller Road Cohecton NY 12726

Register: Online at catskillstiming.com, mail in this form, or on race day starting at 6:30 at the Kenoza Lake Fire House

For more information: Contact April Ackermann via email at farmerack@yahoo.com or phone 845-701-9054

T-shirts guaranteed to the first 50 registered participants

****Post race refreshments for all participants****

Awards and Raffle prizes!

This memorial fund was set up in memory of two of my family members whose lives were ended far too soon. My dad, **Doug Ackermann** was a dairy farmer who was diagnosed with pancreatic cancer and passed away in January of 2010 at the age of 48. My cousin, **Brenna Darling**, was an x-ray technician who was diagnosed with breast cancer and passed away in April of 2014 at the age of 33.

In their memory, I started this fund to raise money for families in Sullivan County impacted by a life threatening illness.

WAIVER: I know that participating in this event is a potentially hazardous activity and I agree not to enter unless I am medically able. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I am voluntarily entering and assume all risks associated with participating in the event, including but not limited to, falls, contact with others, weather, traffic, and conditions of the course. I waive and release The Community Foundation of Orange and Sullivan and all sponsors and their representatives and successors from the present and future claims and liabilities of any foregoing persons or entities. I grant permission to the foregoing persons and entities to any photos, motion pictures, recordings for any legitimate purpose without remuneration.

Name: _____ **Age:** _____ **M/F:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **E-Mail:** _____

10K _____ **or Relay (teams of 2)** _____ **Walk** _____ **Team Name:** _____

Early Start (option for runners expecting to be over 75 minutes): _____ **Shirt size:** _____

Signature: _____ **Date:** _____

(Parent/Guardian signature if entrant is under 18 years old.)