

25th Anniversary

Washingtonville Scholarship Run

Saturday, April 7, 2018 TIME: 10:00 AM

Register online @ <https://raceroster.com/events/2018/16171/washingtonville-scholarship-5k-2018>

START and finish at Washingtonville High School

54 West Main Street, Washingtonville, NY

COURSE - FAST and FLAT - Main St. USTFA Certified course NY03013AM

- *5K RUN** - Medals given to top three runners in each age group.
9+under, 10-12, 13-15, 16-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80+up
- *5K WALK** - (For serious walkers) Medals given in 5 women's and 3 men's groups [People who run will be disqualified]
Walkers will start 2 minutes after the runners.
- *5K "WOG"** - For those who want to jog but may have to walk some. Walk JOG
OR for those who want to walk but may have to jog some.
- *KID'S RUN** - On the High School track distances from 50 meters to 800 meters. (Age appropriate distances)
(Toddlers to **Starts at 11:00 AM** - Each finisher will receive a medal.
Fifth Grade) First 60 to register will receive a T-shirt provided by Washingtonville Pediatrics (*cotton only*).
- *T - SHIRTS** - Given to all participants in the 5K run, walk and "WOG", who have pre-registered by **March 23, 2018**. Any applications received *after* 3/23/18 are not guaranteed to receive a t-shirt.

Awards: The top three overall women and men will receive a custom designed trophy.

REGISTRATION: Race Day registration and Packet Pick-up will be in the High School cafeteria
8:00 AM to 9:30 AM Saturday, April 7, 2018

ENTRY FEE: 5K \$25 Postmarked by 3/23/18 (*tax included*) \$28 after March 23rd (*tax included*)

All paper applications must be received by 3/30/18

(All Race Day 5K Entries will be **\$30.00** Registration Fee)

Kid's Run \$5 Postmarked by 3/23/18 **\$7** race day

*****TEAM REGISTRATION*****

Create a team of 15 athletes and get a \$5 discount on your registration fee. Registration online only.

Contact lmaguire@ws.k12.ny.us for entry code

There will be a pasta luncheon sponsored by the WHS Student Coalition immediately following the race in the WHS Cafeteria. Participants from all races are free and cost for any additional family member or friend is \$5/ticket.

Don't forget to stop by *the Taft PTA* Tricky Tray and Raffle Tables sponsored by the Taft PTA. Tickets are \$1 each or 7 tickets for \$5.00. *Proceeds to benefit the Annual Washingtonville Scholarship Run.*

MAKE CHECKS PAYABLE TO: Washingtonville Scholarship Fund

Race Contacts: Washingtonville Scholarship Run
20 Toleman Road
Washingtonville, N.Y. 10992
Phone - (845) 497 - 4000 (x-22501/22502)

Lindsay Maguire
E-mail: lmaguire@ws.k12.ny.us
Barbara Quinn
E-mail: bquinn@ws.k12.ny.us

PROCEEDS go to the Washingtonville Scholarship Run Exemplary Student Scholarships

Washingtonville Scholarship Run Entry Form

Register Online: <https://raceroster.com/events/2018/16171/washingtonville-scholarship-5k-2018>

RUNNER 1: Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Sex: Male / Female (circle) Age on 4/7/18 _____ Birthdate: _____

Phone: _____ Email: _____

Please **circle** your race category and shirt size below.

<u>5K Race (\$25) Category</u>		<u>5K Shirt Size</u>	<u>Kids Run</u>
Run	Walk	Youth L	Kids Run \$5 (Race Day \$7) Shirt Size: YM YL Adult S
WOG	Virtual	Adult S M L XL 2XL	

If no t-shirt size is indicated, men will receive a large and women will receive a medium.

Additional runner under the same address:

RUNNER 2: Name: _____

Sex: Male / Female (circle) Age on 4/8/18 _____ Birthdate: _____

Please circle your race category and shirt size below.


<u>5K Race (\$25) Category</u>		<u>5K Shirt Size</u>	<u>Kids Run</u>
Run	Walk	Youth L	Kids Run \$5 (Race Day \$7) Shirt Size: YM YL Adult S
WOG	Virtual	Adult S M L XL 2XL	

All 5K categories add \$3.00 after 3/23. Race day registration is \$30.00

In consideration of my entry, I hereby for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages I may have against The Village of Washingtonville, Washingtonville Central School District, Sponsors, Race Officials, their representatives, successors and assigns, arising from any and all injuries suffered by me while participating in the Washingtonville Scholarship Run. I hereby attest and verify that I am physically fit and have trained for the completion of the event and that my condition has been verified by a Licensed Medical Doctor.

RUNNER 1: Signature: _____ Parent Signature (if under 18) _____


RUNNER 2: Signature: _____ Parent Signature (if under 18) _____



Pasta Luncheon!!

There will be a **free** pasta luncheon for all race participants after the race. If you wish to purchase a pasta lunch for *non-participants*, the cost is \$5 per person.

You can pre-pay for tickets now with your registration form.



Race Registration Fee(s): \$ _____

Pre-paid Pasta Ticket(s) (\$5 each) \$ _____

Total Fee Included: \$ _____