



HARVEST MOON 5K
FRIDAY, OCTOBER 2, 2020
MORE INFO: WWW.MILESINMARTINSVILLE.COM

When: Friday, October 2, 2020, 6:30 p.m.

Where: Sports Complex. Start will be by the driving range.

Registration: \$25 before August 27th (with a t-shirt guarantee by the 20th); \$30 August 28th - September 30(no t-shirt guarantee); **NO RACE DAY REGISTRATION**

Includes: Race swag, on-course aid-station, a free drink ticket for the Micro-Brew Beer Garden!

Awards: Overall Male/Female Winners and Male/Female Age Groups (5 year increments beginning at 14 & under)

Packet Pick-up: Friday, October 2 from noon-4:00 p.m. at the Martinsville YMCA and then at the trail from 5 to 6:00p.m.

Please complete and return with registration fee to either YMCA

First Name _____ Last Name _____

Address _____

Birthdate: _____ Age as of race day _____ Male/Female (please circle)

Phone # _____ E-mail Address _____

Check One: 5K: _____ 8K: _____

T-Shirt Size (*No shirt guarantee after August 20th*)

__Adult S __Adult M __Adult LG __Adult XL __Adult XXL



Waiver: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in Harvest Moon 5K, and do hereby release the Family YMCA Inc., all sponsors, the Smith River Sports Complex, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all rules for participation, and acknowledge that the event committee may refuse my entry at its discretion. I further grant permission for the YMCA to use any photographs, motion pictures or other recording of the event for legitimate purposes. I HAVE NOTED ANY MEDICAL CONDITIONS on the reverse side of this form. I verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in the event.

Entry Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

(required of entrants under 18)

Emergency Contact: _____ Phone: _____

Title Sponsors:



**GARDNER | BARROW
SHARPE P.C.**
ATTORNEYS FOR THE INJURED & DISABLED

