



# The Spring Run Challenge

**SOVAH 10K & Super Run 5K**  
**Saturday, May 13, 2022 38:00 a.m.**  
**Lake Lanier, Martinsville, VA**

**When:** Saturday, May 13 race begins at 8:00 a.m.

**Where:** Beautiful Lake Lanier (pre/post race festivities to be held at former Druid Hills School)

**Registration:** 5K-\$35.00 10K-\$35.00 until April 11th, price increases by \$5.00 per category from April 11-May 10. REGISTRATION AFTER MAY 10TH \$45 No shirt guarantee after April 27th.

**Includes:** T-shirt, On-course Aid Station, Goody Bag, Finisher Awards for all, & post-race food!

**Awards:** Overall Male/Female Winners and Male/Female Age Groups for both the 5K & 8K

**Packet Pick-up:** Friday, May 12 12-6:00 Martinsville YMCA or Race Day, 7:00 a.m. Druid Hills School

Please make checks payable to the **YMCA**. Registration forms can be mailed to the YMCA,  
 3 Starling Ave., Martinsville, VA 24112

**Please complete and return with registration fee to either YMCA**

- 5K (3.1 miles)**       **10K (6.2 miles)**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone # \_\_\_\_\_ E-mail Address \_\_\_\_\_

Child's Name(s) (stroller division ONLY) \_\_\_\_\_ Age \_\_\_\_\_

T-Shirt Size (please check one)

**No shirt guarantee after April 27th**

- \_\_ Youth XS    \_\_ Youth S    \_\_ Youth Med    \_\_ Youth Lg  
 \_\_ 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 TheSOVAH Super Run 5K & 8K Event, and do hereby release the Family YMCA Inc., all sponsors, 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:

