REGISTRATION FORM (CONTINUED) Almond Branch Initiative 10K Run and Relay

WAIVER AND RELEASE

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

I understand that participating in this event is potentially hazardous. and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event. including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road. I, for myself and my heirs and executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and hereby waive, release and forever discharge the event organizers, sponsors, promoters, Almond Branch Initiative, Bryn Mawr Racing Company, and each of their agents, representatives, successors and assigns, the race committee, volunteers, and all other persons associated with the event, for my all liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise. I understand that the entry fee is non-refundable and non-transferable. I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event. Email addresses will not be traded or sold but may be used to promote this event or any events sponsored by the Almond Branch Initiative.

RUNNER #1

Ciamatura.

Signature
(If under 18, Parent/Guardian Signature)
Date:
RUNNER #2
Signature:
(If under 18, Parent/Guardian Signature)
Date:

ALMOND BRANCH INITIATIVE

MISSION

In a world filled with hardship, the Almond Branch Initiative offers hope through tangible and emotional support to those whose lives have been torn apart by war, political strife and terror in Israel.

WHAT WE DO

Almond Branch comes alongside individuals and groups in need by providing:

- Humanitarian aid in the form of medical supplies, shelter, emergency assistance, food and clothing
- Materials and labor for building projects
- ► Emotional support through the process of building relationships

Almond Branch encourages people to come together in the face of adversity. By promoting an atmosphere of unity, we inspire those afflicted by hardship to support one another after our work is complete.

For more information on Almond Branch Initiative, please visit www.hopeinhardship.org

PROCEEDS AND DONATIONS

Almond Branch helps hundreds of men, women and children every year who are suffering. Proceeds and donations go directly to humanitarian aid and the materials and equipment needed to complete our building projects.

By becoming an entrant in the 10K Run and Relay, you are bringing hope and encouragement to those facing hardship.

PLEDGES

Make your participation count more by collecting pledges or donations. Pledge forms can be downloaded at www.hopeinhardship.org/race

Thank you for your commitment to blessing others.





SATURDAY, MAY 11, 2013

PEACE VALLEY PARK DOYLESTOWN PA

RACESTARTS 8:30 AM

Professionally Timed • Awards • T-shirts
Food • Music • Fun

Proceeds benefit the Almond Branch Initiative. www.hopeinhardship.org

EVENT LOCATION

Peace Valley Park (Sailors Point) New Galena Road & Myers Road Doylestown, PA 18901



RACE DATE & START TIME

Saturday, May 11, 2013 (Rain or Shine) Race Day Registration 7 - 8 am Race Start Time 8:30 am

ENTRY FEES

Pre-Registration

10K Individual \$30 per person

10K Relav \$40 per 2 person Relay (\$20 per person)

Race Day Registration (Check and Cash Only)

10K Individual \$35 per person

\$50 per 2 person Relay (\$25 per person) 10K Relay

PACKET PICKUP

Packet pickup will be available for those who pre-registered on Friday, May 10 from 12 - 5 pm at the

Solid Rock Cafe & Books 156 E Butler Avenue Chalfont, PA 18914

Race day registration and packet pickup will be available from 7 - 8 am on May 11.

COURSE

This 10K Run and Relay is around beautiful Lake Galena. The course features flat land intermixed with rolling hills. Part of it is on public roads, but most is on a paved bike and hike trail.



AWARDS

Award ceremony will start after the final runner crosses the finish line.

10K Individual

Overall Male & Female

Top 3 Male and Female Age Group Finishers:

19 & under, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & over

10K Relay

Top 3 Male/Male, Female/Female and Male/Female Relay Teams. Scoring for the relay will consist of a team's combined final time. No duplication of awards.

THE RACE WILL BE COMPLETED AS FOLLOWS

Both individual 10K runners and relay runners will start at 8:30 am at Sailors Point. For the relay, the first runner will start the race, and at the approximate half way point, will hand off a baton to the second runner who will complete the remaining distance. At the baton exchange location, 10K individual runners will keep right and relay runners will hand off the baton to their partner on the left hand side of the running course. Both runners in the relay team should park at Sailors Point, a bus will be available to transport the second runner to the half way point and bring the first runner back to Sailors Point.

POST RACE PARTY

Celebrate after the run with music, food and fun!

AMENITIES

Professional race timing by Bryn Mawr Racing Company. Pre-registration entitles you to receive a race T-shirt. Race day registrants will receive a T-shirt while supplies last.

Register online at www.brynmawrrunningco.com

QUESTIONS

For more information, please email: joan@hopeinhardship.org or visit www.hopeinhardship.org/race



REGISTRATION FORM

Almond Branch Initiative 10K Run and Relay

☐ 10K Individual ☐ 10K Relay
Relay Team Name:
RUNNER #1 (OR INDIVIDUAL)
Name:
Address:
City:
State/Zip:
Phone:
Email:
DOB: Age on Race Day:
Gender: □ Male □ Female
Please select T-shirt size: (Adult Sizes Only) □ S □ M □ L □ XL □ XXL □ None
RUNNER #2
Name:
Name:
Address:
Address: City:
Address:
Address: City: State/Zip: Phone: Email:
Address: City: State/Zip: Phone: Email:
Address: City: State/Zip: Phone: Email: DOB: Age on Race Day:
Address: City: State/Zip: Phone: Email: DOB: Age on Race Day: Gender: □ Male □ Female Please select T-shirt size: (Adult Sizes Only)
Address:

Attn: Joan Gausch 528 Mockingbird Way Warrington, PA 18976

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