



John Thompson Memorial

5K Run/Walk

Hosted by

Neshannock X-tra Mile Boosters

EIN #46-1914764

Find us on www.RunSignUp.com, Facebook, www.ntsdl.org,
and www.smileymiles.com



- Location:** Neshannock High School, New Castle, PA 16105
- Time:** May 21st, 2016, 9:00am
8:00 am to 8:45 am--Registration at the stadium behind the school
Race day registrations accepted
- Fees:** Preregistered with shirt-\$17(by 5/12) Race day-\$20 (shirts if available)
Family **preregistered** discount for 4 or more--\$15 per participant
NEW Team Discount—4 or more team members--\$15 (**Register together**)
Contact Wendy Hutchison for more information on team discounts—724-263-2171
- Proceeds:** Neshannock Cross Country Team , Trail Maintenance & JT Scholarship
- Awards:** Top 3 male/female finishers overall
Top 3 male/female finishers in the following age groups:
0-9, 10-14, 15-19, 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+

**5K Run/Walk Entry Form –Preregistrations due May 12th, 2016– mail registration to:
Neshannock X-tra Mile Boosters, c/o Wendy Hutchison,
8 Victoria Dr., New Castle, PA 16105**

Name _____ Age _____ Gender M ___ F ___

Address _____ Phone _____

_____ Team(if applicable) _____

Please check: Run ___ Walk ___ Amount enclosed \$ _____ Ck # _____

T-Shirt (circle one): Adult Small Adult Med Adult Large Adult XL Adult XXL (+\$2) Adult XXXL (+\$2)

Youth Small Youth Med Youth Large

Please make checks payable to “Neshannock X-tra Mile Boosters”

Waiver: In consideration of the acceptance of this entry, I waive for myself, my heirs and assign all claims for damages which I might have against the race, sponsors, or other organizations/individuals as a result of any and all injuries which I might be received during the contest. I also release any photos which may involve me.

Signature required _____ **Date** _____

(Parent to sign if participant is under 18)