St. Patrick's Day 5K "Recovery Run"

Sunday, March 21, 2010 at 11am
Hibernian Hall, Lynn

*Been celebrating St. Patrick's Day **all** month long? In a winter slump?*
Here's a 5K road race guaranteed to get you back on track!

Cost: $20 non-refundable prior to March 1
$25 non-refundable after March 1 - race day

Packet Pick-up and Post-Registration:
Sunday, March 21 from 9:00 -10:15 a.m. at Hibernian Hall

Pre-Registration: Online at Active.com or Send check payable to AOH/LAOH Road Race and completed registration form to Ann Mannion, c/o Hibernian Hall, 105 Federal St, Lynn, MA 01905

Course: The Recovery Run is a loop course starting at Hibernian Hall that goes through some of the residential neighborhoods of West Lynn and finishes at the Hibernian Hall. Walkers are welcomed! View the course online at http://www.usatf.org/routes/view.asp?rID=311649

Race Amenities: Long-sleeved t-shirts to the first 150 entrants, race timing, water on the course, post-race food and refreshments, and entertainment. Prizes for the top three male and female overall winners.

Contact: For more information, contact Race Director, Karyn Coulon CoolieATC@hotmail.com

Proceeds to benefit the general charitable funds of the AOH & LAOH and the Annual AOH Scholarship Fund

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Please Print clearly and complete all information to register for the St Patrick's Day 5K Recovery Run

Last, First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Male ☐ Female ☐ Run ☐ Walk☐

Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Phone ☐☐☐☐☐☐☐☐☐☐

City, State ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Zip Code ☐☐☐☐☐ Shirt Size S ☐ M ☐ L ☐ XL ☐ XXL ☐

Email _____ Age on Race Day ☐☐ (<18 needs parent/guard sig.)

Are you an AOH or LAOH member? _____ What division? ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

This waiver must be read and signed in order to be registered.

In consideration of the acceptance of this entry: myself and my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against all Race Organizers, Committees, Sponsors, Stewards, Benefactors, and Volunteers, for any and all injuries suffered by me while training for, or competing in, and traveling to and from this event. I attest I am physically fit and sufficiently trained to compete in this event. I also willingly release my image for photography, video and film cameras which may chronicle this event..

Signature: _____ Date: _____

Parent/Guardian Signature (if under 18):_____ Date: _____