



ANGEL RUN 5K

NORTH STAR, OHIO

The 16th annual Angel Run 5k...remembering all lost loved ones.

Sunday, July 21, 2013 - 9:00 AM | Fireman's & American Legion Picnic, North Star, Ohio

RACE LOCATION AND TIMES Starts and finishes at the North Star Park, east of town (in North Star, Ohio)
 Pre-registration due by July 12, 2013
 Race day registration begins at 7:30 a.m.
 Fun Run for children begins at 8:45 a.m.

ENTRY FEE \$20.00 Day of race – includes top quality shirt – limited supply
 \$15.00 Pre-registered – includes shirt
 \$12.00 Day of race – without shirt
 \$ 9.00 Pre-registered – without shirt
 \$10.00 Shirt only – no race
 \$ 1.00 Fun Run

Make checks payable and mail entries by July 12, 2013 to:
 The Angel Run, P.O. Box 124, Osgood, OH 45351



WEBSITES: Website: www.angelrun5k.com | Online registration at: www.goodtimesraces.com

RESULTS See website after race

AWARDS Plaques for the top 3 male overall, top 3 female overall and medals for top 3 in each age category

COURSE Flat, scenic course – times each mile, water stops (down & back course)

DOOR PRIZES Many door prizes donated by generous sponsors. **Must be present to win.**

NEW THIS YEAR Electronic Chip Timing! See website for more information and course map.

RACE DIRECTOR Topp Family (419) 336-6295 or (419) 582-4013 or angelrun5k@hotmail.com

AGE GROUPS

10 and under	20 – 24	35 – 39	50 – 54	65 – 69	80 and over
11 – 14	25 – 29	40 – 44	55 – 59	70 – 74	
15 – 19	30 – 34	45 – 49	60 – 64	75 – 79	

PROCEEDS TO A \$750 ANGEL RUN SCHOLARSHIP, NORTH STAR FIRE DEPARTMENT & NORTH STAR AMERICAN LEGION

..... **THE ANGEL RUN 5K RUN/WALK – JULY 21, 2013 AT 9:00 AM**
ENTRY FORM AND WAIVER OF LIABILITY (Must be signed to participate)

AGE AS OF DEC 31, 2013 _____ BIRTHDATE ____/____/____

NAME _____ SEX: M F

TEAM NAME (if applicable) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ EMAIL: _____

SHIRT SIZE (please circle)
ADULT S M L XL XXL
YOUTH S M L
AMOUNT ENCLOSED _____

WAIVER: In consideration of my entry in The Angel Run 5K, I am intending to be legally bound for myself, my heirs, executors, and administrators, and do hereby WAIVE, RELEASE, AND DISCHARGE The Angel Run, Wayne Healthcare, Wayne Hospital Company, Rocketship Sports Management, Good Times Event Services, organizers, volunteers, and sponsors; as well as their respective agents, parent subsidiaries, affiliates, successors and assigns; from ANY and ALL liability, all claims and damages, demands, actions whatsoever in any manner arising or growing out of my participation in this event. I also understand and agree that the event may subsequently use for publicity and/or promotional purposes my name, photographs, video or other records of me participating in this event without liability or obligation to me. I have read the entry form and certify compliance by my signature. REFUND: I also agree that my entry fees, once paid, are non-refundable. I have read the entry form and certify compliance by my signature.

 PARTICIPANT SIGNATURE AND PARENT/GUARDIAN IF UNDER AGE 18

 DATE