

2nd ANNUAL
Punxsy Phil Fighters
5 K Run / 1 Mi Walk

FIGHTING TO CURE DIABETES
JUNE 5, 2010

- Date/ Time:** *Saturday, June 5, 2010* 11:00am registration will begin at 10:00am
Location: *Punxsutawney Rails to Trails* located just off of Route 36 South behind Prushnok Drive, Punxsutawney, PA 15767
5K Awards: Top 3 Male and Top 3 Female Overall Finishers and top three in each age group
Age Groups: 19- under, 20-29, 30-39, 40-49, 50-59, 60+
Professional Timing: Road Race management and timing by Miles of Smiles Timing Services and results at <http://www.smileymiles.com>
T-Shirts: Guaranteed T-Shirts to **PRE-REGISTERED** participants **BY MAY 21, 2010**
5K Entry Fee: **\$15 until May 21, 2010 - \$20 after May 21, 2010**
1 Mile Entry Fee: **\$10 until May 21, 2010 - \$15 after May 21, 2010**
*Of course additional donations to the cause are always welcome!
Contributions are tax deductible as the American Diabetes Association non-profit charitable organization.*
Checks made payable to: American Diabetes Association
Mail to: Kelly Ferrent 586 Barilar Road Punxsutawney, PA 15767
Questions: Call Kelly Ferrent 814-938-0495 or E-mail kellyferrent@yahoo.com

Entry form -Punxsy Phil 5k run/ 1mile walk

Name _____ Male _____ Female _____
Address _____ - _____ Age _____
City/State/zip _____ Phone # _____
T-shirt size (circle one): Small Medium Large XL **Are you a Diabetic?** Yes No
E-mail _____ Select One: 5k run 1 mile walk

Waiver: In consideration of your accepting my entry, I the undersigned, intending to be legally bound hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Borough of Punxsutawney, Rails to Trails, P & N Coal Company, Punxsy Phil Fighters, USA Track & Field, and any other sponsors and their representatives, successors and assigns, for any and all claims and liabilities of any kind arising out of my participation in this event, even though the liability may arise out of the negligence or carelessness on the part of the persons named in the waiver. I agree to abide by any decisions of a race official relative to my ability to safely run/walk. I assume all risks associated with running/walking, including but not limited to falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I attest and verify that I will participate in this event as a footrace entrant and that I am physically fit and sufficiently trained for the completion of the event.

Participant Signature _____ Date _____

Parents Signature (if under the age of 18) _____ Date _____