***HospiceCare 10K Chocolate Chase***

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|  **304-645-2700** | **Saturday April 14, 2018** |

**All proceeds benefit the local division of HospiceCare and The Peyton Hospice House**

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| **Course Information:**The Race will start at the Greenbrier Valley Airport, cross Rt. 219N and follow Arbuckle Rd. to Fairview Rd. and end at the Greenbrier County Courthouse. Awards will be given out at Greenbrier County Courthouse. **SHUTTLE WILL BE AVAILABLE UNTIL @10:45 am BACK TO AIRPORT!****RACE STARTS AT 9am****Awards and Age Groups:**Prizes awarded to top 3 male/female in each age group and overall male/female14 and under ,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 and Up |  | **Registration: *on-line: www.aptiming.com*****Pre- Registration - $20(non-refundable) *Must pre-register before 12 noon March 20th to guarantee t-shirt* Race-Day Registration - $25 (non-refundable)**Please fill out the form below Make Checks Payable to: **HospiceCare1265 Maplewood AveLewisburg, WV 24901** |
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**HospiceCare Chocolate Chase 10K Registration Form
 PLEASE PRINT**

 **M F**

**First Name Last Name Shirt Size DOB Age Group Gender**

 (**mm/dd/year)**

**Address**

**City State Zip**

**E-Mail *(for future race info)*  Phone**

Waiver: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely compete the run. I assume all risks associated with running in this event, including but not limited to falls, contact with other participants, the effects of the weather (including cold weather and ice), traffic and the condition of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of the acceptance of my entry, I for myself, and anyone entitled to act on my behalf, waive and release Chocolate Chase 10k, race officials, volunteers and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event.

**Signature (Parent if under 18) ALL PARTICIPANTS MUST SIGN ENTRY FORM Date**