Avon Vol. Fire Dept. 75th Anniversary 5K Run / Walk, April 14, 2018

Registration: begins 7:30 AM Race Day. Start Time: 9:00 AM



Race director and contact information:

Chief Michael Trick

25 Darling Drive, Avon CT 06001

860-677-2645, mtrick@avonvfd.org

Course begins and ends at;

Pine Grove Elementary School, 151 Scoville Rd, Avon, CT 06001

April 14th, 2018. Family friendly, Strollers Welcome, Sponsor Expo at School, Fire Trucks

Parking at Thompson Brook School, 150 Thompson Rd, Avon, CT 06001. Overflow parking at Rails to trails

Entry Fee \$30 day of, \$25 online until April 12, 2018 at 8:00 PM. First 150 finishers medals guaranteed.

Awards: Top three finishers overall civilian (male and female). Top three First responders (male and female).

Register On-Line: https://runsignup.com/Race/CT/Avon/AvonVolunteerFireDept75thAnniversary5K

Name:	Email:		
Address:	Town:		Zip:
Phone:	_Age on Race Day: S	Sex: Male / Female	First Responder : Yes / No
Mail form and make check paya	ble to Avon Vol. Fire Dept.	. 25 Darling Drive Av	on CT. 06001.
Please place 5K on memo line.	Amount enclosed:	Shirt Size: S	M L XL XXL
USATF certified course CT10026	SJHP will be run in the reve	rse direction	

I know that running/walking is a potentially hazardous activity. I should not enter and run/walk 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 complete the run/walk. I hereby certify that I am in good health and I have trained to run/walk the distance of the race which I am entering. I assume all risks associated with running/walking in the event 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 risks being known and appreciated by me. Having read this waiver and knowing these facts, I hereby waive and release Avon Vol. Fire Dept. its officers, and volunteers, all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all the foregoing to use any photographs, motion pictures, recording, or other record of this event for any legitimate purpose.

If under 18 years old a parent or guardian must sign.

Signature:	Date:
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