



### Awards & Prizes:

- **CASH PRIZES** will be given to the top male and female finishers!!  
\$150 first place  
\$100 second place  
\$50 third place
- Prizes/Awards will be given to the top team in each division!!

### Proceeds to Benefit:

Lancaster County  
Cross-Country 5k Association

For more information  
and to register online visit:  
[www.lancastercountyc5k.com](http://www.lancastercountyc5k.com)

### Start/Finish Sponsors:



### Course Sponsors:



Lancaster Otolaryngology



PERSILA V. MERTZ, M.D.  
Eye Physician and Surgeon



The Inside Track



LANCASTER  
family practice  
ASSOCIATES

Jon Warner Homes



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Making Success Personal.™



[www.lancastercountyc5k.com](http://www.lancastercountyc5k.com)



5K Run/Walk 12.01.12

Manheim Township High School  
Cross-Country Course  
5134 School Road  
Neffsville, PA 17606

- Individual and Team Divisions
- Free T-Shirts
- **CASH PRIZES** & Awards
- Free goodie bag for each runner/walker!!

### Presented by:

Heart of Lancaster  
Regional Medical Center



Lancaster Regional  
Medical Center

Youth One Mile  
Fun Run!

## Race Information



**Where:** Manheim Township High School  
Cross-Country Course  
5134 School Road, Neffsville, PA 17606

**Race Start Time:** 5K Race at 10:00 am  
Youth One Mile Fun Run at 11:00 am  
Awards presentation at 11:15 am

**When:** On-Site Registration on Race Day is from  
8:30 - 9:30 a.m., Manheim Twp. H.S.

### Entry Fees:

#### Early Registration: (Postmarked by Nov. 19)

- \$20/person for individual entries
- \$55/team (3-person team)
- \$10 entry fee for youth one mile fun run
- Includes free T-Shirt

#### Late Registration: (Nov. 20 thru Race-day)

- \$25/person for individual entries
- \$70/team (3-person team)
- \$15 entry fee for youth one mile fun run
- T-Shirts will be distributed on a first come first served basis on race day for everyone who did not pre-register.

### Checks Payable to:

Lancaster County Cross-Country 5k

### Complete and Mail with entry fee to:

Lancaster County Cross-Country 5k  
P.O. Box 10911  
Lancaster, PA 17605

For more information & directions please visit:

[www.lancastercountyc5k.com](http://www.lancastercountyc5k.com)

## Registration Form

Every participant, and/or their parent or guardian if participant is under age 18, must read this waiver form and sign in the appropriate space below. Signatures on the registration form signify each person has read, understands, and abides by this information. Please check your division and fill in the appropriate information and sign.

### Individual Division

- |   |  |
|---|--|
| <input type="radio"/> Boys – 14 and under | <input type="radio"/> Girls – 14 and under |
| <input type="radio"/> Boys – 15 - 19      | <input type="radio"/> Girls – 15 - 19      |
| <input type="radio"/> Men – 20 - 29       | <input type="radio"/> Women – 20 - 29      |
| <input type="radio"/> Men – 30 - 39       | <input type="radio"/> Women – 30 - 39      |
| <input type="radio"/> Men – 40 - 49       | <input type="radio"/> Women – 40 - 49      |
| <input type="radio"/> Men – 50 - 59       | <input type="radio"/> Women – 50 - 59      |
| <input type="radio"/> Men – 60 - +        | <input type="radio"/> Women – 60 - +       |

### Walker Division

- |                           |                             |
|---------------------------|-----------------------------|
| <input type="radio"/> Men | <input type="radio"/> Women |
|---------------------------|-----------------------------|

### Fun Run Division

- |   |  |
|---|--|
| <input type="radio"/> Boys – 12 and under | <input type="radio"/> Girls – 12 and under |
|---|--|

### Team Runner Division: (3 runners)

- |   |  |
|---|--|
| <input type="radio"/> Boys – 14 and under | <input type="radio"/> Girls – 14 and under |
| <input type="radio"/> Boys – 15 - 19      | <input type="radio"/> Girls – 15 - 19      |
| <input type="radio"/> Men – Open          | <input type="radio"/> Women – Open         |
| <input type="radio"/> Co-Ed – Open        |  |

### Individual

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Emergency Phone No.: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
MTHS Alumni: \_\_\_\_ Yes \_\_\_\_ No  
Participant's Signature: \_\_\_\_\_  
If under 18, Parent/Guardian Signature: \_\_\_\_\_

**T-Shirt Size** ☐ Small ☐ Medium ☐ Large ☐ X Large

### Liability Waiver and Photo/Video Release

With my signature above, I agree to indemnify and hold harmless Lancaster County Cross-Country 5k Assoc. and the Manheim Township School District including employees, volunteers and all other persons against loss or expense, including attorney's fees by the reason of bodily injury, property damage or personal injury arising out of the negligent or intentional conduct of myself or my family members involved in the 5k run. Furthermore, I give permission for myself (or my child if under 18) to participate in any photographs or video taken for publicity purposes. I understand participation is entirely voluntary and will involve moderate to heavy physical activity. I also understand that there are risks of accidents from participation that can result in injury. I am not affected by a physical condition or disability that would prohibit me from safely participating in this activity.

### Team Name: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Emergency Phone No.: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
MTHS Alumni: \_\_\_\_ Yes \_\_\_\_ No  
Participant's Signature: \_\_\_\_\_  
If under 18, Parent/Guardian Signature: \_\_\_\_\_

**T-Shirt Size** ☐ Small ☐ Medium ☐ Large ☐ X Large

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Emergency Phone No.: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
MTHS Alumni: \_\_\_\_ Yes \_\_\_\_ No  
Participant's Signature: \_\_\_\_\_  
If under 18, Parent/Guardian Signature: \_\_\_\_\_

**T-Shirt Size** ☐ Small ☐ Medium ☐ Large ☐ X Large

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Emergency Phone No.: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
MTHS Alumni: \_\_\_\_ Yes \_\_\_\_ No  
Participant's Signature: \_\_\_\_\_  
If under 18, Parent/Guardian Signature: \_\_\_\_\_

**T-Shirt Size** ☐ Small ☐ Medium ☐ Large ☐ X Large