

36th OAKFIELD LABOR DAZE 5K Run/Walk

August 31st, 2019 at 8:30 AM
Elroy D. Parkins Town Park (Little League park)
37 Drake Street (Route 262), Oakfield, NY



www.oakfieldbetterment.com/5krun

Partial Proceeds donated to WARRIOR HOUSE Of WNY

Race Info: Timing by Score This!!! INC

7:00am - 8:15am Day of Race Registration/Package Pickup at Elroy D. Parkins Town Park
8:30 AM: Run/Walk Start
9:45 AM: Awards

Preferred registration: <https://register-this.com/?raceid=20190831OAKF&t=C>

This link may be used to make donations as well.

REGISTRATION:

\$25.00 online before August 10th (includes event T shirt)

\$25.00 mail-in registration postmarked on or prior to August 1st (includes event T shirt)

RACE DAY REGISTRATION:

\$30.00

Mail entry form with payment to: **Score This!!! INC 15 Ranch Trail Ct, Orchard Park, NY 14127**

Entry fees are non-refundable. Net proceeds will be donated to Warrior House of WNY. To learn more or to donate to Warrior House of WNY Please visit their website at <https://www.warriorhouseofwny.com>

PLEASE COMPLETE ONE FORM PER RUNNER OR WALKER

Last Name: _____ First Name: _____ Gender: MALE / FEMALE

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) ____ - _____ Email: _____ Age on Aug.31st: _____

Event: (circle one) RUN WALK

Division: (circle one): 14-under, 15 - 19, 20 - 29, 30 - 39, 40 - 49, 50 - 59, 60+

Shirt Size* (circle one) S M L XL XXL ***Free shirts to early registrants only**

Waiver Agreement & Publicity Authorization

In consideration of your accepting this 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 or which may hereafter accrue to me against Warrior House of WNY, Town/Village of Oakfield, Oakfield Betterment Committee and any and all other sponsors or volunteers, and their representatives, successors and assigns for any and all injuries suffered by me in said event or arising out of my traveling to and/or returning from said event. I have read the above statements. I fully understand them and my signature confirms their full acceptance. I attest and verify that I have knowledge of the risks involved in this event, and I am physically fit, sufficiently fit, and sufficiently trained to participate in this event. I, the undersigned, also give permission for my first and last name and/or image (photo or video) to be used in connection with post-event publicity, with the general public as the target audience.

Participant Signature

Signature of parent/guardian (if under 18)

Date

Please contact Carrie Monachino camonac2316@yahoo.com for more information, or visit Oakfield Betterment Committee's Facebook page or www.oakfieldbetterment.com.