

Avon/Avon Lake 9th Annual Vet Day 5K Run and 1K Mutt Strut

"A Great Course for a Great Cause!"

SATURDAY NOVEMBER 5, 2022 @ 0900

Location:

Avon Veterans Park
3701 Veterans Memorial Pkwy
Avon, Ohio 44011

5K FUN RUN/WALK EVENT:

Open to ALL

Event:

- 5k Run-cross country style

Rules:

- Have Fun
- Finish the Run

Cost:

\$25 Pre-Register

\$30 Race Day Register

EVENT SCHEDULE:

0730: Check In and Race Day Registration

0830: Pledge/Safety Briefing

0900: 5k Run/Walk Begins

1000: Awards and Closing

AWARDS:

5k:

- Top overall Male and Female
- Top 2 in age groups; 18 and under, 19-29, 30-39, 40-49, 50-59, 60 and older

GIVEAWAYS:

- Long Sleeve T-shirts and goodie bags provided to first 200 pre-registered participants (and to race day registrants, if supplies available)
- Refreshments will be provided to participants before and after the events

Email questions or if interested in sponsoring to : erik.luca@yahoo.com

VET DAY 5K RUN REGISTRATION

Two ways to register: 1. **ONLINE** securely at www.hermescleveland.com. Online registration closes **Friday, Nov.4 at 9 am**.

2. **MAIL your completed entry form** with a check payable to "Hermes Sports & Events," 2425 West 11th Street Suite 2 Cleveland OH, 44113, Mailed entries must be received by **Wednesday Nov. 3. Please complete one form per person.** Walk-up registration accepted race day.

Name: _____ Address: _____ Gender (circle one): M F

City/State/Zip: _____ Email: _____ Phone: _____

Date of Birth: ____/____/____ Age on Race Day: _____ T Shirt Size (circle one) S M L XL XXL Are you a Veteran (circle one)? Y N

I am participating in (circle one) Fitness Challenge Team Name: _____ 5K Run 1K Mutt Strut

Waiver must be read and signed before entry is accepted: Knowing, and at my own risk, I am participating in the Veteran's Challenge and 5k Run. I do hereby waive release any and all claims against VFW Post 7035, Hermes Sports & Events Inc., City of Avon, Veterans Memorial Park event sponsors and any employee, volunteer, or officials of these organizations from any claim of injury (including death) that I may incur as a result of my participation in the event. I further hereby certify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate. If, however, as a result of my participation I require medical attention, I hereby give my consent to authorize medical personnel to provide such medical care as deemed necessary. I grant full permission for use of my name and photography or video in connection to the event.

Signature of Participant (Parent/guardian if under 18) _____ Date: _____