The **38th** Annual **Edwin Krawitz Memorial Law Day Race Judicata**

For AWSOM's Full Donation Wishlist please visit: www.awsomanimals.org/index.php/donate/wishlist

Proceeds benefit AWSOM — Animal Welfare Society of Monroe

Donations Welcome Include But Not Limited To: Beds, Collars/Leashes, Grain-Free Dog Treats, <u>Purina One</u> Wet Dog Food, Small Bites Dog Food (Any Brand— Regular or Grain-Free), <u>Fancy Feast</u> Wet **Kitten** Food, <u>Friskies</u> or <u>Sheba</u> Wet Cat Food, Cat Litter, Cat Toys, Hand Soap/Sanitizer, Bleach, and more.

Sunday, May 16, 2021

Race will begin at 9:00 AM

Pre-Registration:
MUST Register before May 7, 2021
\$15.00 Adult
\$10.00 Children under 18

Registration after May 7, 2021

\$20.00 Adult \$15.00 Children under 18

Please mail registration form and payment to:

Monroe County Bar Association

913 Main Street, Stroudsburg, PA 18360

Please make checks payable to: MCBA

Register online at www.runsignup.com

New Location!

Day of Event Check-In & Start

Monroe County Bar Association 913 Main Street, Stroudsburg, PA 18360

<u>CHECK-IN/REGISTRATION: 7:30—8:15 AM</u> Walk-ins after 8:15 AM may be manually timed

Awards and refreshments will be available back at Monroe County Bar Association.

Dogs are welcome—MUST be on leash at all times—5K Fun-Run/Walk ONLY

For more information please contact: MCBA Office at 570.424.7288 or info2@monroebar.org
Law Day Race Chair: Steve Krawitz 570.421.7800 or krawitzesq@usnetway.com

The 38 th	Annual
Edwin Krawitz	z Memorial

Sunday, May 16, 2021

Runner's #		

In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, by heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against any charity/beneficiary of this event, Monroe County Bar Association, Borough of Stroudsburg, Township of Stroud and any and all sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I will participate in this event as a footrace entrant, that I am physically fit and have sufficiently trained for the completion of this event, and my physical condition has been verified by a licensed Medical Doctor.

Signature	Date Par			rent Signature if under 18 years of age		
Last Name	First Name			Phone Number		
Address	City	State Zi	ip	Email Address		
Please indicate for result scoring and award purposes:			At	torney/Judge:	Race shirt size	
5-Mile Race 5K Fun-Run/Wal	k		Yes	s: No:	S M L	
Age: Date of birth://_	Gender:			,	XL XXL	
Up to 19 20-29 30-39 40	-49 50-59 60-69	70 &Up			1st 100 Runners	