



Annual Memorial 5K Run

5K Memorial VIRTUAL 36th Annual Memorial Run

Saturday,
May 27, 2023

www.va5k.com



Benefiting local Veterans of the
surrounding area and the VAPAC

Event Date: Saturday, May 27, 2023

Event Time: 9:00 am start time for on location run.

Location: Lebanon VA Medical Center
1700 S. Lincoln Avenue
Lebanon, PA 17042

Entry Fee: Preregistration deadline: 05/19/23
5K: \$30
Fun Run with T-shirt: \$20
Fun Run without T-shirt: \$1
Toddler Trot—free
(Veterans receive a \$5 discount!)

Late Registration: 5K: \$35
Fun Run with T-shirt: \$25
Fun Run without T-shirt: \$5
(T-shirts are not guaranteed for late registrants)
(Veterans receive a \$5 discount!)

On-Line Registration: <http://www.runsignup.com>

Mail Registration: Checks shall be made payable to: VAPAC
Mail to:
Sara Balmer (136A)
VAPAC Treasurer
Lebanon VA Medical Center
1700 South Lincoln Avenue
Lebanon, PA 17042

Questions: Email us at
Jessica.Lightner@va.gov
or call 717-272-6621 x5694
www.va5K.com

Can you believe
it's the 36th year
of this wonderful
event that honors
our Veterans!!!

Check our
Facebook page to
see what's
happening:

<https://www.facebook.com/va5klebanon>

Participant Registration

	<u>Reg</u>	<u>Late</u>	<u>Veteran</u>	<u>Late</u>
<u>Sign up for:</u>	<u>Fee:</u>	<u>Reg</u>	<u>Pre-Reg:</u>	<u>Reg:</u>
<input type="checkbox"/> 5K Run	\$30	\$35	\$25	\$30
<input type="checkbox"/> Fun Run	\$20	\$25	\$15	\$20
<input type="checkbox"/> Fun Run (no t-shirt)	\$1	\$5	\$0	\$0

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Birthdate _____ Age _____

Emergency Contact Name and Phone Number _____

T-Shirt Size	Gender		
<input type="checkbox"/> S	<input type="checkbox"/> Male	<input type="checkbox"/> 10th Run	<input type="checkbox"/> 30th Run
<input type="checkbox"/> M	<input type="checkbox"/> Female	<input type="checkbox"/> 20th Run	
<input type="checkbox"/> L			
<input type="checkbox"/> XL			

If Veteran, Branch of Service _____

WAIVER: In consideration of acceptance of this entry, I waive any and all claims for myself and my heirs against officials, sponsors, VAPAC and South Lebanon Township for any injury or illness which may directly or indirectly result from my participation in the Memorial 5K Run. I further state that I am in proper physical condition to participate in this event. I hereby voluntarily and without compensation authorize pictures and/or voice recording(s) to be made of me (or of the above-named individual).

Signature _____