

Lockport High School Foundation LockRock Armed Forces Day 5K

WHAT

- 5K (\$20 pre-registration / \$25 day of registration)
- 5K All Students \$10
- Awards in various age categories 5 year intervals

GUARANTEED FREE RACE TSHIRT FOR ALL REGISTERED BY MAY 1ST

- Additional shirts may be on sale at the event Any proceeds generated from this event will benefit the Lockport High School Foundation
- T-Shirts for day of registrants, while supplies last

WHEN

- Saturday, May 16th, 9:00 a.m.
- Registration begins at 7:15 a.m.
- Parade Precession starts at 8:30
- 5K starts at 9:00 a.m. across the street from Palace Theatre on Elm St.

WHERE

- Lock 34 Bar & Grill | 80 Main Street, Lockport, NY

CONTACT

Phone: 716-628-3926
Cookie Butcher

• Post-race party at Lock 34 Bar & Grill

REGISTRATION FORM

LAST NAME FIRST NAME M.I.

ADDRESS: NUMBER AND STREET

TOWN/CITY STATE/PROV ZIP/POSTAL CODE

SEX (M/F) AGE PHONE W/AREA CODE EMAIL ADDRESS

XS S M L XL XXL

Disabled Veterans FREE

5K pre-registered runners receive a T-shirt

- 5K \$20 pre-registration - online or make check payable and mail to Score This Inc, 15 Ranch Trail Court, Orchard Park, NY 14127
- 5K \$25 Day of Race check or cash only, [do not mail check]
Please make check payable to: Lockport High School Foundation
- 5K \$10 - All Students Through Grade 12

Register online at:
www.score-this.com

Official Race Use Only

WAIVER

I understand that participating in this event is potentially hazardous and that I should be properly trained and medically able to participate. In consideration for you accepting this entry and by signing below, I, for myself and on behalf of our successors, executors and heirs, assume full and complete responsibility for my participation in the event, and hereby forever waive, release, discharge and indemnify Lockport High School Foundation and its affiliates and their directors, officers, employees, agents and representatives, from and against any and all suits, claims, losses, costs, expenses, damages and fees now and in the future arising or relating to this event, whether caused by the negligence, action or inaction of any of the above parties.

Signature of Participant, Parent or Guardian _____ Date _____

Name, Address and Phone Number of Parent or Guardian _____