T-shirts guaranteed for registrations before price change

Check-in opens at 7:30AM Run starts at 9:00AM

SATURDAY, AUGUST 24TH LATROBE MEMORIAL STADIUM

Timed and chipped 5K for walkers and runners Course through historic downtown Latrobe



Ope form per person. All folds required					
One form per person. All fields required					
Name					
DOB	Phone #				
Address					
City		State	_ Zip code		
DOB	Age Group 10 and under	□ 11-19 □ 20-29 □ 30	D-39	□ 50-59 □ 60+	
Email		Gender □ Female □ I	Male l'n	n a □ Runner □ Wal	ker
Tshirt Size □ Youth Large □ A	dult Small 🗆 Adult Medium 🛭	□ Adult Large □ Adult	:X-Large 🗆 A	Adult 2XL (+\$2)	
On conditions of this entry form be and release all rights I may have ag attest and verify that I am physicall Signature	gainst sponsors and officials of y fit and have sufficiently trained	this race, and of any ared for this race.	nd all injuries I	may sustain in this e	
Payment Method	yable to Latrobe Parks & Rec) 🛛	Cash □ Money Order	□ Credit/D	ebit Card	
Card #		Exp date		_ Security code	
Name on card		Zip Code		_	
Signature				ATRO	
	il vour registration form. Chec				1

You can email, fax or mail your registration form. Checks payable to Latrobe Parks & Rec Latrobe GLSD Parks & Recreation PO Box 307, Latrobe, PA 15650

