



Saturday, May 13<sup>th</sup>, 2017

**\$30**/person from February 10<sup>th</sup> to March 31<sup>st</sup>  
**\$35**/person from April 1<sup>st</sup> to May 10<sup>th</sup>  
**\$40**/person during packet pickup and day-of registration

Make checks payable to East Shore YMCA and mail to: East Shore YMCA  
701 N. Front Street  
Harrisburg, PA 17101, Attn: Tom Gifford

**No refunds will be issued.**

For more information and race results, visit [www.YMCARun.com](http://www.YMCARun.com)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

T-Shirt Size: **circle one** - S M L XL

Email: \_\_\_\_\_

Gender: \_\_\_\_\_ Age **(on 5/13/17):** \_\_\_\_\_

D.O.B. (mm/dd/yy) \_\_\_\_\_

Waiver: In consideration of the acceptance of this entry, I waive all claims for myself, my heirs and assigns against the sponsors, cooperating and coordinating groups and any individuals associated with the event and will hold them harmless for any and all injuries which may result from my participation. I further state that I am in proper physical condition to participate in this race. I also hereby give my permission to the media to use my name and/or picture in any newspaper, broadcast, telecast or any other account of this event without limitation and without any obligation of anyone to compensate me further. I have read, understood and accept the waiver and release above. My submission of this form shall act as my legal signature. I certify that I am eighteen (18) years of age or older. If registering a child under eighteen (18) years of age, I certify that I am the parent or legal guardian of such child.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature (If younger than 18): \_\_\_\_\_