

Nick
ADENHART

5K
Memorial
RUN/WALK

\$25 before 5-28-17: 5K RUN/WALK

\$30 after 5-28-17: 5K RUN/WALK

\$10 children under 13yr: 5K RUN/WALK

\$10 Kids: 1K RACE (\$15 BOTH RACES)

Participants and spectators are encouraged to wear baseball apparel.

THE 8TH ANNUAL NICK ADENHART MEMORIAL 5K RUN / WALK

SATURDAY
JUNE.10.2017

SPONSORED BY: The Nick Adenhardt Memorial Fund, The Williamsport Wildcat Athletic Boosters, Hagerstown Fairgrounds Softball Association, and The Washington County Recreation Department.. Proceeds will benefit the Williamsport Wildcat Athletic Boosters and the Nick Adenhardt Memorial Fund.

EVENT TIMES:
7:00AM: Race Day Registration
Registration Ends at 8:15 AM
8:30AM: Kids Race START
9:00AM: 5K Run/Walk START

EVENT LOCATION: Packet Pickup (June 9th from 6-8 PM & Race Day until 8:15) & Registration will be located in Williamsport Elementary School Gymnasium. (1 South Clifton Drive Williamsport, MD 21795.)

DOOR PRIZES: All 5K & kid's Race/Walk participants will be eligible for race day door prizes. Door prizes include: Orioles baseball

COURSES: 5K course and Kids Race starts and finishes at the High School Baseball Field. (Located in Front of the Elementary School Gym)

T SHIRTS: All pre-registered 5K run/walk and kid's race participants that are registered by May 28 are guaranteed a short-sleeve T-shirt. Kids running both races will receive only one shirt.

5K RUN AWARDS: 1st Place-\$100, 2nd Place-\$75, 3rd Place-\$50, cash prizes for both men's and women's overall finishers. Top 3 finishers of each age group will receive medals.

KIDS RACE: For 12 years old and younger. Kid's Race course is approximately 1k. Kid's Races will be timed and top 3 finishers in each age group will be awarded.

Kids running in both races MUST fill out a separate registration form for each race and total fee is \$15.

CHECK YOUR EVENT/FEE											
5K RUN/WALK \$25 before 5/28/17 \$30 after 5/28/17				5K RUN/WALK YOUTH FEE (Under 13yr) \$10 \$15 both Races				1K Kids Race (Under 13yr) \$10 \$15 Both Races			
First Name:				Last Name:							
Street Address:											
City:				State:				Zip:			
Gender:				Age on Race day:							
Date of Birth			Month			Day			Year		
Cell Phone Number:				Email Address:							
CHECK YOUR T SHIRT SIZE (One Shirt/Person)											
Youth Small	Youth Medium	Youth Large	Adult Small	Adult Medium	Adult Large	Adult X-Large	Adult XX-Large				
CHECK YOUR AGE CATEGORY											
U6 Kids	6-9Kids	10-12Kids	12&U 5K	13-15	16-19	20-29	30-39	40-49	50-59	60-69	over 70
<p>Concussion Information Sheet. What happens if you think your child has suffered a concussion? Any athlete even suspected of suffering a concussion should be removed from play immediately. No athlete may return to activity after an apparent head injury or concussion, regardless how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. Our organization requires the consistent and uniform implementation of well-established return to play guidelines: A young athlete who is suspected of sustaining a concussion or head injury in a practice game shall be removed from competition at that time. The athlete not return to play until they are evaluated by an authorized health care provider trained in the evaluation and management of concussions and received written clearance to return to play from that health care provider. Parents and coaches should inform each other of if they think the athlete may have a concussion. Remember it is better to miss one game than to miss the whole season. When in doubt, sit them out. What are the criteria for gradual return to play? No symptoms at rest/no medication used to manage symptoms. No return of symptoms with typical physical and cognitive activities of daily living. Neurocognitive functioning at typical baseline. Normal balance and coordination. No other medical/neurological complaints/findings. www.cdc.gov/concussion ACKNOWLEDGEMENT FOR PARTICIPANTS UNDER 19YR Please retain a copy of the documents that have been provided for your future reference. I hereby acknowledge that I received the Concussion Information Sheet and the Fact Sheet for Athletes and Parents. I certify that I understand the information that has been provided concerning the signs, symptoms, prevention and treatment of concussions and the seriousness of concussions.</p>											
Concussion Information Sheet Parent/Guardian Signature											
<p>RELEASE & CONSENT FORM: In consideration of the acceptance of my entry/my child's entry, I for myself or my child our executors, administrators, and assignees...do hereby release and discharge the organizers of this race and all other sponsors and organizers of all claims and damages, actions, whatsoever in any manner arising out of my/my child's participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event and I am/my child is physically fit and sufficiently trained to participate in this event. Further, I hereby grant full permission to any all of the foregoing use to use my/my child's name, photographs, videotapes, motion pictures, recordings or any other record of this event for any legitimate purpose without compensation or remunerations.</p>											
Participant Signature (If participant is under 19yr Parent/Guardian)											

Mail Entire Registration Form and Fee to:
 Nick Adenhardt Memorial 5K Run P.O. Box 355 Williamsport, MD 21795
 Please Make Checks to: Williamsport Wildcat Athletic Booster Club. Inc. "Adenhardt Race"
CONTACT: Emily Crabtree, wildcatcoach82@aol.com, 301-988-4217
 INFORMATION: Online registration, course map, and race details are available at www.imathlete.com/events/thenickadenhardt5Krunandwalk