

Saturday, August 19, 2017 8:00 am

(registration begins at 7:00am)

Advance Registration: (Postmarked by August 12th) - **\$15**

**guaranteed
T-Shirt**

Late Registration: (Postmarked after August 12th) - **\$20**

Team Registration: 5 or more runners from an organization **\$12** per runner
(registrations must be bundled together and postmarked by August 12th) Race Day fee **\$17**

Checks should be made payable to **Littlestown Boys Basketball
Booster** and mailed/delivered to **Littlestown YMCA, 95 Keystone St,**



Awards and Course Records:			Overall		Male: 19:27	Female: 19:17
					Bob Breighner	Jessica Paholsky
Age Group	Male/#Trophies	Female/#Trophies	Age Group	Male/#Trophies	Female/#Trophies	
13&Under	23:58 (3) Michael Gazmen	29:06 (3) Marrin Crist	35 - 39	22:33 (3) Mike Greene	23:13 (3) Kelly Renner	
14 - 19	22:32 (3) Daniel Gazmen	23:22 (3) Janelle Kress	40 - 44	21:11 (3) Chris Grelli	25:31 (3) Tara Topper	
20 - 24	19:31 (3) Derek Breighner	19:17 (3) Jessica Paholsky	45 - 49	19:27 (3) Bob Breighner	26:57 (3) Tara Topper	
25 - 29	29:26 (3) Noah Miller	24:43 (3) Nicole Groge	50 - 59	20:28 (3) Doug Crist	27:08 (3) Vicki Arentz	
30 - 34	22:45 (3) Dylan Schoneweis	23:31 (3) Lisa Kuhns	60 - 69	21:52 (3) Neal Riemenscheider	35:10 (3) Carol Goodpaster	

Littlestown Good Ole Days 5K Run/Walk Registration Form

Last Name: _____ First Name: _____

Address: _____ City/State/Zip: _____

Email: _____ Phone: _____

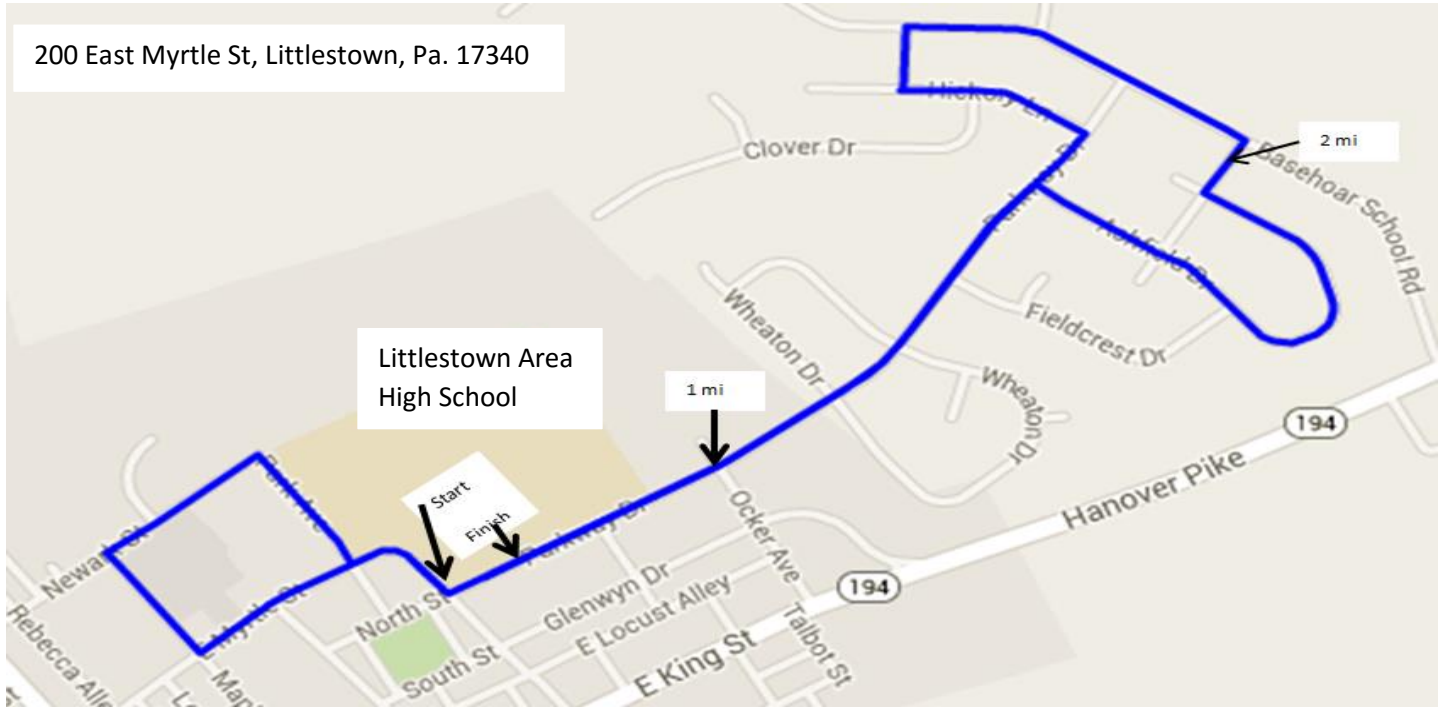
Sex: M F Race Day Age: _____ Date of Birth: ___/___/___

Shirt Size: S M L XL Team Organization (if applicable) _____

Please don't forget to sign waiver on back of form



Course Map



Sponsors: Cole Family Dentistry, Sheetz, VDJ Wesley “D”, Kennie’s Market, American Legion Post 321, Littlestown Dental Associates, Breighner Tire, LaBella Italia Restaurant, Little’s Funeral Home, Randy’s Electrical Service Inc, Ace, Shores Auto Service and Sales, Vista Machines, Hull's Video Express, Edward Jones, Big Dipper, 194 Imports, Restoration And Collision Experts, SRC Insurance, PIVOT Physical Therapy.

In consideration of being permitted to participate in the Good Ole Days 5K 2017, I hereby for my heirs, my personal representatives and myself assume any and all risks that might be associated with the event. I further waive, release, discharge and covenant not to sue YMCA, Littlestown Historical Society, Littlestown Bolt Boosters, their officers, employees, organizers, volunteers or other representatives or successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities. I also agree to the use of any photo, film or videotape of the event that may include my likeness for any purpose.

Participant’s Signature: _____

If the participant is under 18, the parent/legal guardian must sign