



Jay Community Center

2019 Patriot Run

Trail 5k & 10K



WHAT: A Trail 5k Run/Walk benefiting the Jay Community Center. This race will feature light obstacles.

WHEN: Saturday July 20, 2019
 Race Day Registration: Begins at 7:00 am at the Jay County Recreation Complex
 Race will begin at 8:00 am

WHERE: Jay County Recreation Complex located on Como Road & 450 South

ENTRY FEE: 5k: \$25 without Race Day Shirt Add A Cotton Shirt for \$5 or a Tech Shirt for \$10
 10k: \$30 without Race Day Shirt Add A Cotton Shirt for \$5 or a Tech Shirt for \$10

- RACE INFO:**
- Water Stations
 - Refreshments at finish
 - Trail course with light obstacles
 - Electronically timed
 - 60 minute time limit

Registrations can be found at www.jaycc.org and www.facebook.com/JayComCenter
 Register online at www.JayCC.org

2019 Patriot Run/Walk 5k & 10K

Participant Name: _____ Guardian Name (if applicable): _____
 Address: _____ Add Additional Participants Below:
 City: _____ State: __ Zip: _____
 Phone: _____ DOB: _____
 Email: _____

Please check the age group you fall under: Male _____ Female _____
 9 & Under _____ 10-14 _____ 15-19 _____ 20-29 _____ 30-39 _____ 40-49 _____ 50 & 59 _____ 60-69 _____
 70 & Better _____ Walkers _____

ADD a Shirt (circle one): Cotton \$5 Tech \$10
 Shirt Size: YS YM YL AS AM AL AXL AXXI AXXXL AXXXXL
 Please mark what race you are participating in: 5K _____ 10K _____

PARTICIPANT RELEASE: As a participant of the Jay Community Center's Patriot Run 5k walk/run. I agree to hold harmless and release the centers, directors, sponsors, and officials from any and all liability related to this event. I hereby give my consent for the Jay Community Center to use my photograph and likeness to be used in its publications, including its website and social media. I release them from any expectation of confidentiality for the undersigned minor(s) children and myself and attest that I am the parent or legal guardian of the children listed above.

Runner/Parent/Guardian Signature: _____ Date: _____
 Office Use Only: Fee Paid (Y/N) _____ Date: _____ Check No. or Cash: _____ Employee: _____ Receipt#: _____