



**The Hare and Tortoise
New Quarter Park
Run/Walk**

**Karene O'Hare Ovarian
Cancer Memorial**



In Partnership with the Williamsburg Community Foundation

Date: Saturday, September 9, 2017
Location: New Quarter Park
Williamsburg, Virginia

Race day registration and packet pick up: 7:45 am
1 mile fun run/walk: 8:30 am
5K run/walk: 9:00 am
8K run/walk: 9:10 am

Please Print

First Name _____ Last Name _____ Sex _____ Age _____

Street Address _____ Date of Birth ____/____/____

City _____ State _____ Zip _____

Phone (____) _____ Email _____

I am an Ovarian Cancer Survivor

Race Event: **5K Run*** **5K Walk**** **8K Run*** **8K Walk**** **1 Mile Fun Run**

* Combine Running & Walking Allowed

** Walking Only

T-shirt size: S M L XL XXL (for XXL add \$2 please)

Free, SMS Text Message Finish Time. Enter 10 digits Cell Phone Number: _____

Enter Cell Phone Service Provider; e.g., AT&T, Sprint, Verizon... _____

Entry Fees: \$30 pre-registered, postmarked by Wednesday, August 31. \$35 postmarked after August 31 and race day. T-shirts guaranteed to the first 200 registrants. T-shirts race day while supplies last.

Make checks payable to: Williamsburg Community Foundation

Mail check and entry form to: Williamsburg Community Foundation Attn: Karene O'Hare Ovarian Cancer Memorial, 1323 Jamestown Road, Suite #103, Williamsburg, VA 23185

Waiver: I know that running/walking a road is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete this run. I assume all risk associated with running/walking in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including heat and humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry I, for myself and for anyone entitled to act on my behalf, waive and release York County Parks and Recreation, and all sponsors, their representatives and successors from all claims of liabilities of any kind arising out of my participation in this event. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of this event for legitimate purposes. This is a road race under the rules of RRCA and USATF. No partial or full refunds.

Signature (Parent or guardian if under 18) _____ Date _____

ALL ENTRANTS MUST SIGN WAIVER

Website: www.hareandtortoiserunwalk.com

Race Director: John O'Hare, 757-220-5731
Email: john@hareandtortoiserunwalk.com