

## 8th ANNUAL – 5K+ RACE & FITNESS WALK

- **Early registration fees:** \$20 per person, \$50 per family 3 or more, \$10 per student ages 6-18. **Registration form and signed waiver must be received by September 6, 2017 for Early Registration**
- **Race Day registration fees:** \$25 per person, \$55 per family 3 or more, \$15 per student ages 6-18.
- **Registration:** Mail to: **Peter Michael Abbott Memorial Fund, P.O. Box 3132, Peterborough, NH, 03458.** Please make checks payable to: Peter Michael Abbott Memorial Fund. Race packets will be available 7:30 - 8:30 am at the registration booth on race day. **Each participant must fill out a registration form and sign the waiver**
- **Amenities:**
  - 5K+ T-Shirt to the **first 150 registered runners and walkers**
  - Professional timing by Tri-State Racing Service
  - Race results will be posted on race day prior to the awards ceremony as well as on **coolrunning.com**
  - Medals will be awarded at 10:30 am to the first female & male finishers, the oldest & youngest finishers & the top three female & male finishers in the following age categories: 9-Under, 10-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-Up
- **Race Location:** ConVal Regional High School, 106 Hancock Road, Peterborough, NH 03458 (Route 202)
- **Course Description:** The flat, fast, and fun 5K+ (**actual course distance is 3.3 miles**) Run & Walk will start and finish at the ConVal Football Stadium. Participants will journey along parts of the scenic rail-trails of the former Boston & Maine Railroad bed nestled in the beautifully wooded forest of North Peterborough, NH
- **Contact Information:** For additional information or to receive a Registration/Waiver Form please call Charlonne Scribner @ 603-446-3745, email: [peterabbottmemorial@gmail.com](mailto:peterabbottmemorial@gmail.com) or go to our website: [www.peterabbottmemorial.org](http://www.peterabbottmemorial.org)

**NOT ABLE TO ATTEND BUT WOULD LIKE TO SUPPORT THE MEMORIAL FUND WITH A DONATION  
PLEASE FILL OUT NAME, ADDRESS, EMAIL AND DONATION AMOUNT BELOW**

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**DETACH HERE**  
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**WAIVER (MUST BE READ AND SIGNED BEFORE MAILING):**

I know that running is a potentially hazardous activity. I should not enter or run/walk this event 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 the run/walk. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release the Peter Michael Abbott Memorial Fund, the town of Peterborough, New Hampshire, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I understand all fees are nonrefundable.

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

\_\_\_\_\_  
Signature (If Under Age 18 Parent/Guardian MUST Sign) Date \_\_\_\_\_

**PRINT CLEARLY & COMPLETE FORM BELOW**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

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

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age on Race Date: \_\_\_\_\_ Circle Your Gender: **MALE** **FEMALE**

Circle T-Shirt Size: **S** **M** **L** **XL** **XXL**

NOT ABLE TO ATTEND WILL DONATE: \$ \_\_\_\_\_ AMOUNT ENCLOSED: \$ \_\_\_\_\_