

GENOA HOMECOMING

RUN FOR THE BEAT

5K WALK / RUN ~ 1/2 MILE KID'S RUN ~ TOT TROT

Saturday, June 2nd, 2018 – 9:00 AM

Registration Begins 7:30 AM

Race Day Schedule:

8:15 AM - Toddler Trot ~ Kids 1/2 Mile - 8:30 AM ~ 5K Race/Walk - 9:00 AM

Proceeds Benefit HEARTBEAT of Ottawa County

Registration Location: Veterans Memorial Park, Washington and 6th Street, Genoa, OH

Course: All events start and finish at park using village streets, one water stop on the course.
Course is accurately measured.

Awards, Shirts, and Other Information:

- Overall Awards in 5K for top Male/Female, Masters (Ages 40 and Older) Male/Female
- Male and Female age group awards in 5K Race (at least three deep) 9 & under, 10-14; 15-19; 20-24; 25-29; 30-34; 35-39; 40-44; 45-49; 50-59; 60-64; 65-69; 70 & older. No duplication of awards.
- All 1/2 Mile Kid's Run finishers will receive a finishers prize.
- All participants pre-registered by **May 21** will receive a t-shirt. Shirts will be limited for Late or Race day entries.

Entry Fees:

- Online registration at imathlete.com until May 31st (additional service fee will be added for online registration)
- **5K Pre-Registration** \$20 online (plus additional fee) by **Monday, May 21**; or Pre-Registration via **US Mail before May 16**; **Note**; \$25 late and race day registration.
- **1/2 Mile Kids Race** (Age 10 & under) Pre-Registration by **May 21** (\$10 includes shirt); **Race Day** (\$5 no shirt)
- **Tot Trot - Free** (Ages 2 and Under) **Crawler and Walker Division** - (participation prize given to all).
- Entry fees payable to "Heartbeat of Ottawa County", **Check or Money Order; NO CASH.**
Mail to: Run for the Beat; c/o Heartbeat of Ottawa County; P.O Box 903 Port Clinton, OH 43452.
- Address any questions/ concerns to: kim.heartbeat@gmail.com or call at 419-734-9359.

CUT HERE – ENTRY FORM MAY BE PHOTOCOPIED – PLEASE PRINT

NAME: _____ TELEPHONE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ Gender: M _____ F _____ AGE (on race day): _____

SHIRT SIZE: (please circle) ONESIE YL S M L XL 2XL

EMAIL ADDRESS: _____

EVENT: (please circle one) KIDS 1/2 MILE TOT TROT:CRAWLER TOT TROT:WALKER 5K RUN 5K WALK

In consideration of your acceptance of this entry, I hereby for myself, my heir, executors and administrators waive and release all rights for claims and damages I might have against the race director, the Village of Genoa, Heartbeat of Ottawa County, sponsors, Genoa Chamber of Commerce and all related parties for any and all injury or damage resulting from participating in the above event. I am in proper physical condition to participate in this event

SIGNED _____ (Parent or guardian if under age of 18) DATE: _____