

4th Annual

# TRAIL TROT & FAMILY WALK 2015 REGISTRATION

Saturday, June 6th – 8:45 / 9:00 A.M.

**Purpose:** The Friends of the Cynwyd Heritage Trail are hosting the 4th annual 5k run on the Trail to support improvements to the Cynwyd Heritage Trail. Included this year is a family fun walk.

**When:** Race and walker check-in starts at 8:00 AM with walk start of 8:45 AM and race start of 9:00 AM

**Location:**

- Barmouth Trailhead – Levering Mill Rd. and Belmont Ave.
- Parking is available at Barmouth Trailhead, Bala Cynwyd Playground and Cynwyd Station

**Entry:** \$25 online or by mail before May 31<sup>st</sup> **OR** \$30 day of walk/race

**Awards:** RACE ONLY: Male and Female Overall **AND** 6 Age Groups, including 18 & under

**Amenities:**

- All runners receive a T-SHIRT!; Walkers receive (1) t-shirt per family; Additional shirts to be sold at event
- Water on the course and a post-run snack for all runners

**Registration:**

- Online at [www.brynmawrrunningco.com](http://www.brynmawrrunningco.com) (click on 'Events' and search by date) **OR**
- Mail payment with this form to: P.O. Box 695, Bala Cynwyd, PA 19004. Make checks payable to "Friends of the Cynwyd Heritage Trail".

"By indicating your acceptance, you understand, agree, warrant and covenant as follows: I know that running is a potentially hazardous activity. I should not enter or run unless I am medically able & properly trained. I also know that there will be traffic, debris, poor footing and other hazards on the course and assume the risk for running on it. I also assume any or all other risks associated with running or attending the race including but not limited to falls, contact with other participants, the affects of the weather, the conditions of the roads and getting lost, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry fee, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive, release and discharge the organizers of this event, all municipalities in which the all owners of properties through which the race crosses, the race committee, volunteers, the Friends of the Cynwyd Heritage Trail, all other organizations directly or indirectly associated with the race, any or all sponsors including their agents, employees, assigns or any-one acting on their behalf, or anyone else associated in any way with this race, from any or all claims or liability for death, personal injury or property damage of any kind or nature whatsoever arising out of, or in the course of, my participation in this event. This waiver extends to all claims of every kind or nature whatsoever; foreseen or unforeseen, known or unknown.

Signature \_\_\_\_\_ (If under 18, Parent Guardian Signature) Date \_\_\_\_\_

Please indicate in which event you will participate:  Race  Walk

Name: \_\_\_\_\_

Email: \_\_\_\_\_  
*PLEASE PRINT CLEARLY*

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address – Street \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

FOR WALK PARTICIPANTS ONLY: Shirt Size:  S  M  L  XL

FOR RACE PARTICIPANTS ONLY: Gender:  Male  Female Age on race day: \_\_\_\_\_  
Shirt Size:  S  M  L  XL

QUESTIONS? Email [5k@cynwydtrail.org](mailto:5k@cynwydtrail.org)

