Lockport High School Foundation LockRock Armed Forces Day

WHAT

- 5K (\$20 pre-registration / \$25 day of registration)
- 5K All Students \$10
- Awards in various age categories 5 year intervals

GUARANTEED FREE RACE TSHIRT FOR ALL REGISTERED BY MAY 1ST

- Additional shirts may be on sale at the event Any proceeds generated from this event will benefit the Lockport High School Foundation
- T-Shirts for day of registrants, while supplies last

WHEN

- Saturday, May 16th, 9:00 a.m.
- Registration begins at 7:15 a.m.
- Parade Preccession starts at 8:30
- 5K starts at 9:00 a.m. across the street from Palace Theatre on Elm St.

WHERE

Lock 34 Bar & Grill | 80 Main Street, Lockport, NY

CONTACT

Phone: 716-628-3926 Cookie Butcher • Post-race party at Lock 34 Bar & Grill

REGISTRATION FORM
LAST NAME FIRST NAME M.I.
ADDRESS: NUMBER AND STREET
TOWN/CITY STATE/PROV ZIP/POSTAL CODE
SEX (M/F) AGE PHONE W/AREA CODE EMAIL ADDRESS
XS S M L XL XXL
□ Disabled Veterans FREE
5K pre-registered runners receive a T-shirt
☐ 5K \$20 pre-registration - online or make check payable and mail to Score This Inc , 15 Ranch Trail Court, Orchard Park, NY 14127
☐ 5K \$25 Day of Race check or cash only, [do not mail check] Please make check payable to: Lockport High School Foundation
□ 5K \$10 - All Students Through Grade 12
Register online at: www.score-this.com Official Race Use Only
WAIVER
I understand that participating in this event is potentially hazardous and that I should be properly trained and medically able to participate. In consideratio you accepting this entry and by signing below, I, for myself and on behalf of our successors, executors and heirs, assume full and complete responsibility my participation in the event, and hereby forever waive, release, discharge and indemnify Lockport High School Foundation and its affiliates and their directors, officers, employees, agents and representatives, from and against any and all suits, claims, losses, costs, expenses, damages and fees now and in future arising or relating to this event, whether caused by the negligence, action or inaction of any of the above parties.
Signature of Participant, Parent or Guardian Date
Name, Address and Phone Number of Parent or Guardian